



**SERVICE REVIEW
MEETING PROTOCOL**

- **We request that all guests sign in and we ask that you to leave your contact information where indicated if you would like to receive follow up information that may be available**
- **We encourage those interested in the service under review to attend all review sessions that are planned in order to get a comprehensive understanding of the policies and practices currently in place**
- **As we have a large amount of material to cover, we request that participants hold their questions to the end of each session; please know that we will make every effort to provide responses for all questions at some point in the review process**
- **We understand there may be some guests who have questions related to themselves or their family member's circumstances; please be assured we would like to address these questions or concerns with you but will need to do so privately and not as part of these service reviews**



**REVISIÓN DE SERVICIO
PROTOCOLO DE REUNIÓN**

- **Solicitamos que todos los invitados se registren y le pedimos que deje su información de contacto donde se indique si desea recibir información de seguimiento que haya disponible.**
- **Animamos a los interesados en el servicio analizado a asistir a todas las sesiones de revisión que están planeadas con el fin de obtener una comprensión integral de las pólizas y prácticas que están actualmente vigente.**
- **Como tenemos gran cantidad de material para cubrir, solicitamos que los participantes hagan sus preguntas al final de cada sesión; Por favor, sepa que haremos todo lo posible para proporcionar respuestas a todas las preguntas en algún momento del proceso de revisión.**
- **Entendemos que puede haber algunos invitados que tienen preguntas relacionadas con ellos o con las circunstancias de su miembro de familia; Por favor, entienda de que no gustaría abordar estas preguntas o preocupaciones con usted, pero tendrá que hacerlo en privado y no como parte de estas revisiones de servicio.**



**Harbor Regional Center
Service Review Schedule
Supported Living Services**

Meetings are scheduled for the second Monday of each month

First Meeting- -August 14, 2017

During the first meeting our objective is to present a brief overview of HRC supported living services (SLS). We will share the provisions of the Lanterman Act which govern regional center supported living services as well as those provisions of the regulations applicable to SLS. We will provide those in attendance at our meeting with the materials about SLS which we have produced and which are available for clients and families in the HRC Resource Centers. We will review HRC's current policy on supported living as well as the policies of the other regional centers in Los Angeles County. Finally, we will explore the critical issues related to affordable housing as they impact regional center supported living services.

Second Meeting-September 11, 2017

During this meeting we will share information on the number and demographics of HRC clients who live in supported living arrangements. We will share information about the service providers currently available to provide SLS in the HRC service area. We will review with those present the HRC Expectations for SLS as well as the various assessment formats and progress reporting guidelines we expect to receive from SLS service providers on a regular basis. We will share some of the various materials that service providers use to implement their programs and that are available to them from our HRC Resource Center.

Third Meeting-October 9, 2017

This meeting will be dedicated to presentations from two of the SLS service providers working with HRC clients. They will each present detailed information about their programs including the typical activities offered and the service provider staff who create, supervise and provide the services. At this meeting we will hear from a client who participates in one of these programs.

Fourth Meeting-November 13, 2017

In this meeting we will facilitate a discussion among those who have attended and participated in the prior three meetings. Based upon the HRC policies and practices (including service provider policies and practices) we hope to identify those things that are working well and those areas where we might recommend modifications. We hope to have a robust discussion which will form the basis for our draft report.

Fifth Meeting- January 8th, 2018

A draft report which summarizes the material presented and is based upon the discussion held at the fourth meeting will be produced and posted prior to the fifth meeting. We will review the draft, have further discussion and seek feedback on the draft which will be revised accordingly and presented to the Board.

Additional Note: The agenda for each review meeting is very full and we recognize that there may be a need to schedule additional review sessions in order to complete a comprehensive review. We will remain flexible and add sessions as needed.



**Centro Regional Harbor
Programa de Revisión de Servicio
Servicios de Vivienda con Ayuda**

Las reuniones esta programadas para el segundo lunes de cada mes

Primera Reunión- 14 de agosto de 2017

Durante la primera reunión, nuestro objetivo es presentar un breve resumen de los servicios de vivienda con ayuda por HRC. Compartiremos las disposiciones de la Ley Lanterman que gobiernan los servicios de vivienda respaldados por el centro regional, así como las disposiciones de la reglamentación aplicable a los servicios de vivienda con ayuda. Proporcionaremos a los asistentes de nuestra reunión los materiales sobre los servicios de vivienda con ayuda que hemos producido y que están disponibles para clientes y familias en los Centros de Recursos de HRC. Revisaremos la póliza actual de HRC sobre la vivienda con ayuda, así como las pólizas de los otros centros regionales en el condado de Los Ángeles. Por último, exploraremos las cuestiones críticas relacionadas con la vivienda asequible, ya que afectan los servicios regionales de apoyo a los centro de vivienda

Segunda Reunión- 11 de septiembre de 2017

Durante esta reunión compartiremos información sobre el número y la demográfica de los clientes de HRC que viven en arreglos de vivienda con ayuda. Compartiremos información sobre los proveedores de servicios actualmente disponibles para proporcionar servicios de vivienda con ayuda en el área de servicio de HRC. Revisaremos con los presentes las Expectativas de HRC para los servicios de vivienda con ayuda, así como los diversos formatos de evaluación y las pautas de reportes de progreso que esperamos recibir de los proveedores de servicios de los servicios de vivienda con ayuda regularmente. Compartiremos algunos de los diversos materiales que los proveedores de servicios usan para implantar sus programas y que están disponibles para ellos desde nuestro Centro de Recursos de HRC.

Tercera Reunión- 9 de octubre de 2017

Esta reunión estará dedicada a presentaciones de dos de los proveedores de servicios de vivienda con ayuda que trabajan con clientes de HRC. Cada uno presentara información detallada sobre sus programas, incluyendo las actividades típicas ofrecidas y el personal del proveedor se servicios que crean, supervisan y proporciona los servicios. En esta reunión escucharemos a un cliente que participa en uno de estos programas.

Cuarta Reunión- 13 de noviembre de 2017

En esta reunión facilitaremos una discusión entre los que han asistido y participado en las tres reuniones anteriores. Con base en las pólizas y prácticas de HRC (incluyendo las pólizas y prácticas de proveedores de servicios) esperamos identificar aquellas cosas que están funcionando bien y aquellas áreas en las que podríamos recomendar modificaciones. Esperamos tener una discusión sólida que constituirá la base de nuestro proyecto de informe.

Fifth Meeting- 8 de enero de 2017

Antes de la quinta reunión, se elaborara y publicara un Proyecto de informe que resume el material presentado, y se basara en la discusión que se llevó a cabo en la cuarta reunión. Revisaremos el primer proyecto, discutiremos más y buscaremos comentarios sobre el primer proyecto que será revisado y presentado a la Junta.

Nota: La agenda de cada reunión de revisión está muy llena y reconocemos que podrá ser necesario programar sesiones de revisión adicionales para completar una revisión completa. Seguiremos siendo flexibles y agregaremos sesiones según sea necesario.

WELFARE AND INSTITUTIONS CODE - WIC
DIVISION 4.5. SERVICES FOR THE DEVELOPMENTALLY DISABLED [4500 - 4884]
(Division 4.5 added by Stats. 1977, Ch. 1252.)

CHAPTER 6. Development and Support of Community Facilities and Programs [4670 - 4698.1]
(Chapter 6 added by Stats. 1977, Ch. 1252.)

ARTICLE 4. Services and Supports for Persons Living in the Community [4685 - 4689.8]
(Heading of Article 4 amended by Stats. 1992, Ch. 1011, Sec. 20.)

4689.

Consistent with state and federal law, the Legislature places a high priority on providing opportunities for adults with developmental disabilities, regardless of the degree of disability, to live in homes that they own or lease with support available as often and for as long as it is needed, when that is the preferred objective in the individual program plan. In order to provide opportunities for adults to live in their own homes, the following procedures shall be adopted:

(a) The department and regional centers shall ensure that supported living arrangements adhere to the following principles:

- (1) Consumers shall be supported in living arrangements which are **typical** of those in which persons without disabilities reside.
- (2) The services or supports that a consumer receives shall change as his or her needs change without the consumer having to move elsewhere.
- (3) The consumer's **preference** shall guide decisions concerning where and with whom he or she lives.
- (4) Consumers shall have **control** over the environment within their own home.
- (5) The purpose of furnishing services and supports to a consumer shall be to assist that individual to exercise **choice** in his or her life while building critical and durable relationships with other individuals.
- (6) The services or supports shall be **flexible** and tailored to a consumer's needs and preferences.
- (7) Services and supports are most effective when furnished where a person lives and within the context of his or her day-to-day activities.
- (8) Consumers shall **not be excluded from supported living arrangements based solely on the nature and severity of their disabilities.**

(b) Regional centers may contract with agencies or individuals to assist consumers in securing their own homes and to provide consumers with the supports needed to live in their own homes.

(c) The **range of supported living services and supports** available include, but are not limited to, assessment of consumer needs; assistance in finding, modifying and maintaining a home; facilitating circles of support to encourage the development of unpaid and natural supports in the community; advocacy and self-advocacy facilitation; development of employment goals; social, behavioral, and daily living skills training and support; development and provision of 24-hour emergency response systems; securing and maintaining adaptive equipment and supplies;

recruiting, training, and hiring individuals to provide personal care and other assistance, including in-home supportive services workers, paid neighbors, and paid roommates; providing respite and emergency relief for personal care attendants; and facilitating community participation. Assessment of consumer needs may begin before 18 years of age to enable the consumer to move to his or her own home when he or she reaches 18 years of age.

(d) Regional centers shall provide information and education to consumers and their families about supported living principles and services.

(e) Regional centers shall monitor and ensure the quality of services and supports provided to individuals living in homes that they own or lease. Monitoring shall take into account all of the following:

- (1) Adherence to the principles set forth in this section.
- (2) Whether the services and supports outlined in the consumer's individual program plan are congruent with the choices and needs of the individual.
- (3) Whether services and supports described in the consumer's individual program plan are being delivered.
- (4) Whether services and supports are having the desired effects.
- (5) Whether the consumer is satisfied with the services and supports.

(f) The planning team, established pursuant to subdivision (j) of Section 4512, for a consumer receiving supported living services shall confirm that all appropriate and available sources of natural and generic supports have been utilized to the fullest extent possible for that consumer.

(g) Regional centers shall utilize the same supported living provider for consumers who reside in the same domicile, provided that each individual consumer's particular needs can still be met pursuant to his or her individual program plans.

(h) Rent, mortgage, and lease payments of a supported living home and household expenses shall be the responsibility of the consumer and any roommate who resides with the consumer.

(i) A regional center shall not make rent, mortgage, or lease payments on a supported living home, or pay for household expenses of consumers receiving supported living services, except under the following circumstances:

(1) If all of the following conditions are met, a regional center may make rent, mortgage, or lease payments as follows:

(A) The regional center executive director verifies in writing that making the rent, mortgage, or lease payments or paying for household expenses is required to meet the specific care needs unique to the individual consumer as set forth in an addendum to the consumer's individual program plan, and is required when a consumer's demonstrated medical, behavioral, or psychiatric condition presents a health and safety risk to himself or herself, or another.

(B) During the time period that a regional center is making rent, mortgage, or lease payments, or paying for household expenses, the supported living services vendor shall assist the consumer in accessing all sources of generic and natural supports consistent with the needs of the consumer.

(C) The regional center shall not make rent, mortgage, or lease payments on a supported living home or pay for household expenses for more than six months, unless the regional center finds that it is necessary to meet the individual consumer's particular needs pursuant to the consumer's individual program plan. The regional center shall review a finding of necessity on a quarterly basis and the regional center executive director shall annually verify in an addendum to the consumer's individual program plan that the requirements set forth in subparagraph (A) continue to be met.

(2) A regional center that has been contributing to rent, mortgage, or lease payments or paying for household expenses prior to July 1, 2009, shall at the time of development, review, or modification of a consumer's individual program plan determine if the conditions in paragraph (1) are met. If the planning team determines that these contributions are no longer appropriate under this section, a reasonable time for transition, not to exceed six months, shall be permitted.

(j) All paid roommates and live-in support staff in supported living arrangements in which regional centers have made rent, mortgage, or lease payments, or have paid for household expenses pursuant to subdivision (i) shall pay their share of the rent, mortgage, or lease payments or household expenses for the supported living home, subject to the requirements of Industrial Welfare Commission Order No. 15-2001 and the Housing Choice Voucher Program, as set forth in Section 1437f of Title 42 of the United States Code.

(k) Regional centers shall ensure that the supported living services vendors' administrative costs are necessary and reasonable, given the particular services that they are providing and the number of consumers to whom the vendor provides services. Administrative costs shall be limited to allowable costs for community-based day programs, as defined in Section 57434 of Title 17 of the California Code of Regulations, or its successor.

(l) Regional centers shall ensure that the most cost effective of the rate methodologies is utilized to determine the negotiated rate for vendors of supported living services, consistent with Section 4689.8 and Title 17 of the California Code of Regulations.

(m) For purposes of this section, "household expenses" means general living expenses and includes, but is not limited to, utilities paid and food consumed within the home.

(n) A supported living services provider shall provide assistance to a consumer who is a Medi-Cal beneficiary in applying for in-home supportive services, as set forth in Section 12300, within five days of the consumer moving into a supported living services arrangement.

(o) For consumers receiving supported living services who share a household with one or more adults receiving supported living services, efficiencies in the provision of service may be achieved if some tasks can be shared, meaning the tasks can be provided at the same time while still ensuring that each person's individual needs are met. These tasks shall only be shared to the extent they are permitted under the Labor Code and related regulations, including, but not limited to, Industrial Welfare Commission Minimum Wage Order No. 15. The planning team, as defined in subdivision (j) of Section 4512, at the time of development, review, or modification of a

consumer's individual program plan (IPP), for housemates currently in a supported living arrangement or planning to move together into a supported living arrangement, or for consumers who live with a housemate not receiving supported living services who is responsible for the task, shall consider, with input from the service provider, whether any tasks, such as meal preparation and cleanup, menu planning, laundry, shopping, general household tasks, or errands can appropriately be shared. If tasks can be appropriately shared, the regional center shall purchase the prorated share of the activity. Upon a determination of a reduction in services pursuant to this section, the regional center shall inform the consumer of the reason for the determination, and shall provide a written notice of fair hearing rights pursuant to Section 4701.

- (p) (1) To ensure that consumers in or entering into supported living arrangements receive the appropriate amount and type of supports to meet the person's choice and needs as determined by the IPP team, and that generic resources are utilized to the fullest extent possible, the IPP team shall complete a standardized assessment questionnaire at the time of development, review, or modification of a consumer's IPP. The questionnaire shall be used during the individual program plan meetings, in addition to the provider's assessment, to assist in determining whether the services provided or recommended are necessary and sufficient and that the most cost-effective methods of supported living services are utilized. With input from stakeholders, including regional centers, the department shall develop and post the questionnaire on its Internet Web site, and, by June 30, 2012, shall provide it to the regional centers.
- (2) Supported living service providers shall conduct comprehensive assessments for the purpose of getting to know the consumer they will be supporting and developing a support plan congruent with the choices and needs of the individual and consistent with the principles of supported living set forth in this section and in Subchapter 19 (commencing with Section 58600) of Chapter 3 of Division 2 of Title 17 of the California Code of Regulations. The independent assessment required by this paragraph is not intended to take the place of or repeat the service provider's comprehensive assessment.
- (3) Upon a determination of a reduction in services pursuant to this section, the regional center shall inform the consumer of the reason for the determination, and shall provide a written notice of fair hearing rights pursuant to Section 4701.
- (4) Nothing in this section precludes the completion of an independent assessment.

4689.05.

(a) A regional center shall not purchase supportive services, as defined in Section 12300, for a consumer who meets the criteria to receive, but declines to apply for, in-home supportive services (IHSS) benefits, as set forth in Section 12300, except as set forth in subdivision (d).

(b) Consistent with Section 4648, a regional center shall not purchase supported living services for a consumer to supplant IHSS.

(c) Between the date that a consumer applies for IHSS and the date that a consumer's application for IHSS is approved, a regional center shall not purchase supportive services for the consumer at a rate that exceeds the IHSS hourly rate, which includes the IHSS provider hourly wage, the provider's hourly payroll taxes, and the hourly administrative costs, for the county in which the consumer resides.

(d) A regional center executive director may waive the requirements set forth in subdivision (a) if the executive director finds that extraordinary circumstances warrant the waiver, and that a finding is documented in an addendum to the consumer's individual program plan.

§ 58600. Meaning of Words.

17 CA ADC § 58600 BARCLAYS OFFICIAL CALIFORNIA CODE OF REGULATIONS

Barclays Official California Code of Regulations [Currentness](#)

Title 17. Public Health

Division 2. Health and Welfare Agency -Department of Developmental Services Regulations

Chapter 3. Community Services

Subchapter 19. Supported Living Service

§ 58600. Meaning of Words.

Words shall have their usual meaning unless the context or a definition clearly indicates a different meaning. Words used in their present tense include the future tense. Words used in the singular form include the plural form. Use of the word “shall” indicates conduct that is required, and “may” indicates conduct that is permitted.

§ 58601. Definitions.

(a) The following definitions shall apply to the regulations contained in Subchapter 19:

(1) “Circle of Support” means an informal but identifiable and reliable group of people who, pursuant to Welfare and Institutions Code, Section 4512(f), meet and communicate regularly to offer support, at a frequency and in a manner consistent with and appropriate to the need, to the consumer for whose benefit it exists.

(2) “Direct Service(s)” means any service component enumerated in Section 58614.

(3) “Home” means, with respect to the home of a consumer receiving SLS, a house or apartment, or comparable dwelling space meeting community housing standards, which is neither a community care facility, health facility, nor a family home certified by a Family Home Agency, and in which no parent or conservator of the consumer resides, and which a consumer chooses, owns or rents, controls, and occupies as a principal place of residence.

(4) “Individual Program Plan (IPP)” means a written plan that is developed jointly by the consumer, one or more representatives of the regional center, and other persons pursuant to Welfare and Institutions Code, Section 4646(d), through a process which identifies the consumer's needs and preferences and adopts a cost-effective strategy for meeting them.

(5) “Internal Grievance Procedure” means the written set of procedures, established pursuant to Welfare and Institutions Code, Section 4705(a), a SLS vendor uses to achieve the communication and resolution of consumer dissatisfaction.

(6) “Personal Advocate” means a person chosen by the consumer to assist in representing and expressing the consumer's interests and preferences, or, when appropriate, means the conservator or other person legally authorized to act on the consumer's behalf.

(7) “Supported Living Arrangement” means the full array of regional center-funded services and supports received by a SLS consumer, including SLS, day program, transportation, and all other regional center services and supports.

§ 58602. Terms Defined in Other Subchapters.

(a) As used in this subchapter, the following terms have the meanings specified in Title 17, Section 50401:

(1) Department; and

(2) Regional Center.

(b) As used in this subchapter, the following terms have the meanings specified in Title 17, Section 50501:

(1) Community Care Facility; and

(2) Health Facility.

(c) As used in this subchapter, the following term has the meaning specified in Title 17, Section 54000:

(1) Developmental Disability.

(d) As used in this subchapter, the following terms have the meanings specified in Title 17, Section 54302:

(1) Applicant;

(2) Consumer;

(3) Generic Support(s);

(4) Natural Supports;

(5) Service Design;

(6) Service Code;

(7) Special Incidents;

(8) Supported Living Service;

(9) Vendor; and

(10) Vendorization.

(e) As used in this subchapter, the following term has the meaning specified in Title 17, Section 56076(e):

- (1) Family Home;
- (2) Family Home Agency (FHA);
- (3) Relative.

(f) As used in this subchapter, the following term has the meaning specified in Title 17, Section 58501:

- (1) Cost Effective.

§ 58610. Regional Center Responsibilities.

(a) Regional centers shall purchase SLS as defined in Title 17, Section 54349(a) through (e), only:

- (1) From a SLS vendor; and
- (2) Pursuant to a written contract as specified in Sections 58670, 58671, and 58672.

(b) The regional center shall make available to any consumer and, as appropriate, to any consumer's family members relevant and understandable information aimed at enhancing the recipients' general understanding of SLS and ability to make informed choices.

§ 58611. Housing Financial Involvement and Responsibilities.

(a) A SLS vendor shall have no financial or fiduciary involvement in the home, or in any utility or service contract integral to the occupancy of the home, of a consumer to whom the SLS vendor provides services, whenever such involvement would inhibit the consumer's exercise of the rights enumerated in Section 58620, or be inconsistent with any requirement of Welfare and Institutions Code, Section 4689.

(1) Whenever a vendor proposes to have a financial or fiduciary involvement specified in (a), the vendor shall present the proposal in writing to the regional center. The proposal shall assure and demonstrate to the regional center's satisfaction, that:

(A) The involvement would serve the interests of the consumer better than a range of available alternatives;

(B) The consumer understands and approves of the vendor's proposed involvement; and

(C) The requirements of (a) would be met.

(b) The regional center shall not pay any costs incurred by a consumer receiving SLS in securing, occupying, or maintaining a home rented, leased, or owned by the consumer except when the executive director of the regional center has determined that:

(1) Payment of the cost would result in savings to the State with respect to the cost of meeting the consumer's overall services and supports needs;

(2) The costs can not be paid by other means, including available natural or generic supports; and

(3) The costs are limited to:

(A) Rental or utility security deposits;

(B) Rental or lease payments;

(C) Household utility costs;

(D) Moving fees; and

(E) Non-adaptive and/or non-assistive household furnishings, appliances, and home maintenance or repair costs.

§ 58612. Vendor Status Requirements.

(a) A regional center shall grant initial SLS vendor status to an applicant for vendorization if the applicant:

(1) Meets all applicable general vendorization requirements specified in Title 17, Sections 54310 through 54330 with the exception specified in Section 58630(d), and also meets the additional requirements specified in Articles 4 through 6 of this subchapter, or

(2) Has provided direct services and supports which the regional center has identified as being the equivalent of, or essentially similar to SLS, immediately proceeding the effective date of this regulation.

(b) An applicant granted SLS vendor status pursuant to (a)(2) shall meet all requirements of (a)(1) not later than one year after the effective date of this regulation.

(1) The regional center shall terminate vendor status for a vendor failing to meet the requirements of (a)(1) without good cause.

§ 58613. Consumer Eligibility Determination.

(a) A consumer shall be eligible for SLS upon a determination made through the IPP process that the consumer:

(1) Is at least 18 years of age;

(2) Has expressed directly or through the consumer's personal advocate, as appropriate, a preference for:

(A) SLS among the options proposed during the IPP process; and

(B) Living in a home that is not the place of residence of a parent or conservator of the consumer.

(b) Consumers shall not be denied eligibility for SLS solely because of the nature and severity of their disabilities.

§ 58614. Service and Support Components.

(a) Supported Living Service, as referenced in Title 17, Section 54349(a) through (e), shall consist of any individually designed service or assessment of the need for service, which assists an individual consumer to:

(1) Live in his or her own home, with support available as often and for as long as it is needed;

(2) Make fundamental life decisions, while also supporting and facilitating the consumer in dealing with the consequences of those decisions; building critical and durable relationships with other individuals; choosing where and with whom to live; and controlling the character and appearance of the environment within their home.

(b) Supported Living Service(s) are tailored to meet the consumer's evolving needs and preferences for support without having to move from the home of their choice, and include but are not limited to the following:

(1) Assisting with common daily living activities such as meal preparation, including planning, shopping, cooking, and storage activities;

(2) Performing routine household activities aimed at maintaining a clean and safe home;

(3) Locating and scheduling appropriate medical services;

(4) Acquiring, using, and caring for canine and other animal companions specifically trained to provide assistance;

(5) Selecting and moving into a home;

(6) Locating and choosing suitable house mates;

(7) Acquiring household furnishings;

(8) Settling disputes with landlords;

(9) Becoming aware of and effectively using the transportation, police, fire, and emergency help available in the community to the general public;

(10) Managing personal financial affairs;

(11) Recruiting, screening, hiring, training, supervising, and dismissing personal attendants;

(12) Dealing with and responding appropriately to governmental agencies and personnel;

(13) Asserting civil and statutory rights through self-advocacy;

(14) Building and maintaining interpersonal relationships, including a Circle of Support;

(15) Participating in community life; and

(16) 24-hour emergency assistance, including direct service in response to calls for assistance. This service also includes assisting and facilitating the consumer's efforts to acquire, use, and maintain devices needed to summon immediate assistance when threats to health, safety, and well-being occur.

(c) Supported Living Service Vendor Administration, as referenced in Title 17, Section 54349(e), shall include, but is not limited to, the following:

(1) Administrative functions;

(2) Rental or leasing of administrative office(s) space;

(3) Office furniture, supplies, and equipment;

(4) Travel designated in the SLS vendor's contract as necessary for the performance of administrative functions;

(5) Accounting;

(6) Insurance designed to protect against loss by theft, fire, and similar calamities; professional liability; and automobile accident liability; and

(7) Discretionary background checks for paid staff, volunteers, and contractors as specified in the SLS vendor's contract.

§ 58615. Service Records.

(a) SLS vendors shall maintain, and provide access to, records pursuant to all applicable requirements of Title 17, Sections 50603, 50604, and 50605.

(b) In addition to the requirements noted in (a), all SLS vendors shall maintain and provide access to all records relating to service design, service delivery, and employee service time records. These records shall include the following:

- (1) Time sheets;
- (2) Payroll records;
- (3) Accounting records;
- (4) Training records;
- (5) Service evaluations;
- (6) Internal grievance procedure records;
- (7) Historical data documenting the actual delivery of service to consumers for which the SLS vendor has claimed payment, including the:
 - (A) Identification of the vendor by unique identifier;
 - (B) Location of the service;
 - (C) Description of the service; and
 - (D) Inclusive dates of the service; and
- (8) Other records as required by:
 - (A) The terms of the contract; and
 - (B) The regional center, for the purpose of conducting the evaluations specified in Sections 58671(c).

§ 58616. Additional General Provisions.

- (a) A consumer shall have the right to qualify for SLS vendorization and to serve as his/her own SLS vendor.
- (b) No relative or conservator of a consumer shall serve as the SLS vendor for that consumer except when a determination has been made through the IPP process that:
 - (1) Unpaid family-based, or other natural supports for the consumer will not be supplanted;
 - (2) Such service is consistent with the consumer's IPP goals and objectives;
 - (3) The relative or conservator proposing to serve as the SLS vendor has no legal obligation to support the consumer;

- (4) The consumer's preference is for that relative or conservator to serve as the SLS vendor; and
- (5) The service will be at least as cost effective as any available alternative.

§ 58617. Supported Living Arrangement Costs.

(a) Before SLS is provided to a consumer, the projected annual cost of the consumer's SLA, as determined through the consumer's IPP process, shall not exceed the total annual cost of regional center funded services and supports that would be provided if the consumer were served in an appropriate licensed residential facility, as identified through the IPP process, provided:

(1) The total annual cost of services and supports shall include all regional center costs for residential placement (or costs incurred by the State for 24-hour long-term health care), community-based day program, transportation, and other services and supports; and

(2) The appropriate licensed facility for a consumer who is living in a licensed facility at the time of the cost comparison shall be that licensed facility.

(b) Notwithstanding (a), when the consumer does not reside in a licensed facility the projected annual cost of a consumer's SLA shall be deemed to have met the requirements of (a) when the cost is within the range of annual costs of SLAs for other consumers with comparable needs for regional center services and supports, who are currently receiving SLS from the regional center.

(c) Notwithstanding (a), the projected annual cost of a consumer's SLA shall be deemed to have met the requirements of (a) when the consumer is one of a group of consumers receiving, or projected to receive, SLS services from the same vendor, provided the aggregate cost to the regional center of the SLAs of the grouped consumers does not exceed the total cost to the regional center that would have resulted had the costs for services and supports for each of the grouped consumers been determined individually in accordance with (a).

§ 58620. Consumer Preferences and Leadership.

Consumers receiving SLS shall have the right to make decisions that shape the nature and quality of their lives in accordance with their preferences, and consistent with the goals of the consumer's IPP. These rights shall include, but are not limited to, the following:

- (a) Choosing where and with whom to live;
- (b) Controlling the character and appearance of the environment within their home;
- (c) Choosing and changing their SLS vendors and direct service staff;
- (d) Participating actively in their IPP process so that the SLS they receive is based on their needs and preferences;

(e) Receiving services appropriate to their evolving needs and preferences for support without having to move from the home of their choice, for as long as SLS remains the preferred objective, as determined in the consumer's IPP process; and

(f) Informing the regional center about how satisfied they are with the services they are receiving, and to have this information taken into account in the regional center's periodic evaluation of the SLS vendor's service, pursuant to Section 58671(c).

§ 58621. Right to Information.

To assure opportunities for making informed decisions as people supported in community settings, SLS consumers shall have a right to information, in an understandable and accessible form. Such information shall include, but not be limited to:

(a) An explanation of the general concepts, purposes, and practices of SLS, pursuant to Section 58610(b);

(b) Training in the philosophy and objectives of SLS, available from the SLS vendor pursuant to Section 58653;

(c) Information from the SLS vendor describing any change in the SLS vendor's service design that would affect the services being received by the consumer, pursuant to Section 58630(b)(2)(B); and

(d) Notice in writing from the regional center when their SLS is affected by the termination of a contract with a SLS vendor, within 10 days of a notification of contract termination pursuant to Section 58672(a).

§ 58630. General Requirements.

(a) Except as specified in (d), an applicant for SLS vendor status shall develop a written service design that shall be approved by the regional center as a condition of vendorization.

(b) A SLS vendor shall modify or replace the approved service design only:

(1) In accordance with its contractual obligations, if any, to the regional center; and

(2) Upon 60 days' prior written notice to:

(A) The regional center; and

(B) Each consumer (or, when appropriate, the consumer's personal advocate) receiving SLS from the SLS vendor. The notice to each consumer shall communicate clearly the consequences the service design changes will have with respect to the SLS services being received by the consumer.

(c) The regional center shall:

(1) Inform a vendor in writing of the regional center's approval or disapproval of a new or modified service design prior to the expiration of the notice specified in (b)(2); and

(2) Delete from the vendor panel any vendor whose service design has not been approved by the regional center.

(d) Notwithstanding the above, the regional center may waive the service design requirements, provided the:

(1) Applicant proposes to provide services to consumers at no more than one home; and

(2) Competence and suitability of the applicant has been established, using the requirements of Sections 58631 and 58632 as guidelines.

§ 58631. Service Design Components.

A required service design shall include, but not be limited to, the following:

(a) A mission statement;

(b) A description of the range of approaches and strategies the SLS vendor is prepared to employ to achieve the aims specified in Section 58632;

(1) The SLS vendor shall specify for each aim whether and to what extent each of the associated services are available through the vendor.

(c) A description of the SLS vendor's training program, if required, pursuant to Sections 58651 through 58653;

(d) A description of the SLS vendor's internal grievance procedure;

(e) A description of the records the SLS vendor will maintain relating to the procedures for regional center SLS vendor performance evaluation referenced in Section 58671(c);

(f) A description of the SLS vendor's staff hiring criteria, including any minimum qualifications requirements; and

(g) A description of procedures and practices the agency will use to screen paid staff, consultants, and volunteers who will have direct contact with consumers.

§ 58632. Implementation of SLS Philosophy.

A service design shall provide generalized examples sufficiently detailed to illustrate and demonstrate the SLS vendor's competence and suitability to implement the service orientation and principles of SLS stated in Welfare and Institutions Code, Section 4689(a)(1) through (a)(8).

This demonstration shall include, but not be limited to, a general explanation of how the SLS vendor will achieve all of the following:

(a) Support of the consumer's assumption of responsibility for making life decisions on the basis of personal preference that enhance the prospects for increased independence, self-reliance, and self-esteem, and for implementing those decisions effectively;

(b) Provision of ongoing monitoring to help confirm, assure, or signal that:

(1) Significant changes in the needs and preferences of the consumer are reflected in the SLS component of the consumer's IPP;

(2) Supports and services remain responsive to the consumer's needs and preferences; and

(3) Risks of endangerment to health, safety, and well-being are minimized.

(c) Provision of necessary and appropriate assistance to the consumer, subject to the prohibitions on payments enumerated in Section 58611(b) in locating, securing, and maintaining a place to live;

(d) Assistance to the consumer in structuring and maintaining a:

(1) Social environment within the home typical of other non-institutional, non-licensed homes in the community, in which persons without disabilities live;

(2) Community-oriented life in which all generic and natural supports are accessed consistent with the needs and preferences of the consumer; and

(3) Network of critical and durable relationships with others, including a circle of support consisting of a majority of members who are not paid to support the consumer, and with appropriate family participation.

§ 58640. General Requirements.

(a) Each SLS vendor shall provide for the performance of the duties of director, direct service supervisor(s), and employees of the vendor who provide direct service to consumers.

(b) The SLS vendor may:

(1) Separate or combine, and provide for the discharge of, these duties as appropriate to the vendor's circumstances and internal organization; and

(2) Designate staff positions by titles different from those noted in (a).

(c) One individual may assume all the duties of the director, direct service supervisor(s), and direct service employees of the vendor, or any combination of such duties, provided:

- (1) The individual meets the qualifications for any positions assumed; and
- (2) No more than one full-time equivalent position is required for discharging such duties.
- (d) Pursuant to Sections 58630(d), 58654, and 58671(c), a SLS vendor providing services to consumers at no more than one home may be required to meet service design, training, and/or service evaluation requirements that are less demanding than those required by the regional center of other SLS vendors.
- (e) The SLS vendor shall assure that any consultant to the SLS vendor meets all licensing, certification, registration and SLS vendor status requirements applicable to the functions undertaken by the consultant.

§ 58641. Standards for Director Position.

- (a) The SLS vendor shall assign a director to carry out the administrative responsibilities for the SLS vendor's SLS operations, which shall include at least all of the functions noted in (b).
- (b) The director shall have the ability, as a result of any combination of relevant training and experience, to competently and consistently organize and supervise the provision of services in accordance with the SLS vendor's established policies, including:
 - (1) Selecting, and exercising general supervision over, assigned staff; and
 - (2) Overseeing discharge of the vendor's contractual obligations, budgeting, service design and implementation, project planning, staff development, training, evaluation, and the direction of the SLS.

§ 58642. Standards for Supervisory Position.

- (a) The SLS vendor shall assign direct service supervisory staff to supervise the delivery of SLS by direct service personnel.
- (b) All direct service supervisory staff shall have the ability, as a result of any combination of relevant training and experience, to competently and consistently organize and supervise the direct provision of services to consumers in accordance with the SLS vendor's established policies, under the general supervision of the director.

§ 58643. Standards for Direct Service Staff.

- (a) The SLS vendor shall, subject to Section 58620(c), assign direct service staff to provide SLS directly to consumers. Such direct service staff shall have:
 - (1) The skill, training, or education necessary to:
 - (A) Establish and maintain a constructive and appropriate personal relationship with consumers;

- (B) Minimize risks of endangerment to the health, safety, and well-being of consumers;
 - (C) Perform first aid and cardiopulmonary resuscitation (CPR), and operate 24-hour Emergency Assistance systems, as appropriate to the need with respect to any specific consumer; and
 - (D) Achieve the intended results of the service being performed.
- (2) Current and valid licenses, certificates, or registrations that may be legally required to provide the service.

§ 58650. Regional Center Staff Orientation.

(a) Each regional center shall provide SLS orientation for any regional center staff assigned to SLS-related responsibilities, including, but not limited to, the following:

- (1) Regional center policy-making;
- (2) Vending of SLS providers;
- (3) Resource development;
- (4) Supervising, evaluating, overseeing, or consulting with SLS vendors; and
- (5) Service coordination to SLS consumers.

(b) Orientation shall:

- (1) Focus on the philosophy, concepts, and practices of SLS; and
- (2) Occur within three months following the assumption of SLS-related responsibilities.

§ 58651. Vendor Orientation Requirements.

(a) Each SLS vendor shall be responsible for SLS orientation of the SLS vendor's paid and unpaid staff, whose duties include the direction or supervision of SLS, or direct service delivery of the services defined in Title 17, Section 54349(a), (b), and (c).

(b) SLS orientation for each staff member shall occur within the first two weeks of employment, and shall include:

- (1) An overview of the SLS vendor's mission, policies, practices, and SLS philosophy as stated in the approved service design, pursuant to Section 58632, or as otherwise approved by the regional center pursuant to Section 58630(d);
- (2) An understanding of the IPP objectives of each consumer with whom the staff member works directly;

- (3) A focus on the practical use of SLS to promote a consumer's self-reliance;
- (4) Consumers' protections and rights, including:
 - (A) The operation of the SLS vendor's internal grievance procedure;
 - (B) Fair hearing provisions, pursuant to Title 17, Sections 50900 through 50964;
 - (C) Special incident reporting, pursuant to Title 17, Section 54327;
 - (D) Rights of consumers specified in Sections 58620 and 58621; and
 - (E) Protection of consumers from abuse, neglect and financial exploitation, including requirements for documenting and reporting such occurrences.
- (5) A review of appropriate conduct of staff in establishing and maintaining personal relationships with consumers; and
- (6) Participation of consumers in a teaching, consulting, or other instructional resource capacity.

§ 58652. Vendor Continuing Training Requirements.

- (a) Each SLS vendor, subsequent to orientation of staff, shall provide continuing training for all staff whose duties include the direction, supervision, or direct service delivery of the services defined in Title 17, Section 54349(a), (b), and (c).
- (b) Such continuing SLS training for staff shall occur at least annually and shall focus on:
 - (1) Recent developments in the theory and practice of SLS;
 - (2) Policies, procedures, and practices of the SLS vendor targeted at meeting IPP objectives for SLS; and
 - (3) Identification of service delivery issues and challenges, and the accumulated experience of the SLS vendor's staff and others in dealing with them.

§ 58653. Vendor SLS Training for Consumers.

Each SLS vendor shall be responsible for making SLS training available to each consumer receiving SLS from the SLS vendor and to the unpaid members of the consumer's circle of support. Such SLS training shall include, as appropriate to each consumer's preferences, all of the following:

- (a) Philosophy of SLS;
- (b) Consumers' rights;

- (c) Identification and reporting of suspected abuse or exploitation of the consumer;
- (d) Internal grievance procedure of the SLS vendor; and
- (e) Strategies for building and maintaining an effective circle of support.

§ 58654. Waiver of Vendor Training Requirements.

The regional center may waive any or all training requirements specified in Sections 58651 through 58652, provided the:

- (a) Vendor provides services to consumers at no more than one home; and
- (b) Regional center determines that no adverse impact on the quality of service delivery will result.

§ 58660. General Requirements.

(a) Rates for SLS shall be:

- (1) Cost effective to the State; and
 - (2) Agreed upon through contract negotiation between the regional center and the SLS vendor in accordance with Sections 58661 through 58663.
- (b) The regional center may negotiate a rate for the direct services referenced in Title 17, Section 54349(a) through (d), and specified in Section 58614(b). The negotiated rate for direct services shall be established using one of the following methods:

- (1) The direct service rate includes compensation for all SLS vendor's administration services specified in Section 58614(c). No additional rate shall be negotiated for SLS Vendor Administration (Service Code 894), and the vendor shall receive no additional compensation for administration costs;
- (2) The direct service rate excludes all SLS vendor's administration costs for the services specified in Section 58614(c). An additional rate may be negotiated separately for SLS Vendor Administration (Service Code 894), to compensate the vendor for necessary administration costs.

(c) Negotiated rates shall not:

- (1) Result in the regional center paying the vendor more for any service than the vendor would charge any other purchaser of the same or essentially similar service; nor
- (2) Be subject to approval by the Department.

§ 58661. Direct Service Rates.

(a) Direct Service rates shall be:

(1) Limited to the following service code categories:

(A) Personal Support Service (Service Code 891), pursuant to Title 17, Section 54349(a);

(B) Training and Habilitation Service (Service Code 892), pursuant to Title 17, Section 54349(b);

(C) 24-Hour Emergency Assistance (Service Code 893), pursuant to Title 17, Section 54349(c);
and

(D) Supported Living Service (Service Code 896), pursuant to Title 17, Section 54349(d);

(2) Negotiated separately for each service code category enumerated in (a)(1) until July 1, 2000, and based on any one or any combination of the following models that results in the most cost-effective purchase of services by the regional center:

(A) Hourly rates;

(B) Monthly rates;

(C) Flat rates;

(D) Rates based on anticipated average monthly costs;

(E) Rates based on the actual provision of services in a payment period;

(F) Rates applied to services to individual consumers, groups of consumers, or to all the consumers served by the SLS vendor.

(b) Rates may reflect, as appropriate to the applicable method of negotiation specified in Section 58660(b), any combination of the following:

(1) Salaries, wages, and benefits of all SLS staff and consultants to the vendor providing direct service;

(2) Travel and incidental costs designated in the contract as necessary for the provision of direct service; and

(3) Cost of the administration services specified in Section 58614(c), necessary to maintain the SLS vendor's direct service operation.

§ 58662. SLS Vendor Administration Rates.

(a) A separate SLS vendor administration rate shall be limited to SLS Vendor Administration (Service Code 894), pursuant to Title 17, Section 54349(e).

(b) The SLS vendor administration rate shall be:

(1) Negotiated only with SLS vendors whose direct service rates are negotiated pursuant to Section 58660(b)(2);

(2) A single fixed monthly rate; and

(3) Limited to the SLS vendor's costs of administration, as specified in Section 58614(c), which are required to maintain the SLS vendor's direct service operation.

§ 58663. Rate Review and Renegotiation.

(a) The regional center and contracting SLS vendor shall review all negotiated rates at the time of contract renewal, and at other times as specified in the contract.

(b) Regional centers shall, for at least three years from the date of the final payment to the SLS vendor in any State fiscal year, retain and make available to the Department upon request the cost data or analytical bases which the regional center relied upon during rate negotiation with the SLS vendor.

Note: Authority cited: Section 11152, Government Code; Sections 4648(a) and 4690, Welfare and Institutions Code. Reference: Sections 4648(a)(3)(B) and 4648(a)(5), Welfare and Institutions Code.

§ 58670. General Provisions.

(a) All contracts between a regional center and a SLS vendor for the delivery of SLS shall meet all the following applicable contracting regulatory requirements:

(1) Requirements specified in Title 17, Section 50607;

(2) Fiscal provisions specified in Title 17, Section 50609(a), (c), (d), and (e); and

(3) Audit provisions specified in Title 17, Section 50610.

(b) In addition to the requirements specified in (a), all contracts between a regional center and a SLS vendor for the delivery of SLS shall meet all requirements specified in this section, and in Sections 58671 and 58672.

(c) A regional center shall not negotiate a contract with any SLS vendor who has:

(1) Adopted a required service design that has not been approved by the regional center; or

(2) Not signed the State Department of Health Care Services' Medi-Cal Provider Agreement.

(d) A regional center may, pursuant to Sections 58660 through 58662, contract with a SLS vendor for one or more of the SLS services referenced in Title 17, Section 54349, and specified as a SLS service component in Section 58614.

§ 58671. Contract Requirements.

In addition to the requirements set forth in Section 58670, all contracts shall include:

- (a) The vendor's approved service design;
- (b) Performance standards and service provision outcomes the SLS vendor is obligated to meet; and
- (c) The procedures that will be used to monitor and evaluate the outcomes of the vendor's service provision, including but not limited to the requirements of Section 58680.
- (d) Rates agreed upon through negotiation, pursuant to Sections 58660, 58661, and 58662;
- (e) Limitations on the SLS services referenced in Title 17, Section 54349(a) through (e), which the SLS vendor is authorized to deliver;
- (f) Disclosure by the vendor of any past, present or pending residential licensure revocation or denial, and/or any pending application(s) the vendor has filed for residential licensure in the State of California; and
- (g) A description of the contract termination conditions specified in Section 58672.
- (h) A requirement that the vendor maintain service records to support all billing/invoicing as specified in Section 50604(d)(1) through (3)(F), as applicable.
- (i) A requirement that the vendor submit to the regional center with their billings/invoices the information specified in (h) above for the billing period.

§ 58672. Contract Termination.

- (a) The contract shall be subject to termination under any of the following conditions:
 - (1) For cause by the regional center, with notice, pursuant to Title 17, Section 50611(b);
 - (2) For cause by the regional center, with or without notice, when the regional center determines that either:
 - (A) The results of any evaluation of the SLS vendor's service delivery, conducted pursuant to Section 58671(c), warrant contract cancellation; or
 - (B) The SLS vendor's service contributes to life-threatening dangers to, or has resulted in abuse of, a consumer.

(3) Without cause by either party, provided:

(A) The parties to the contract mutually agree to the termination; or

(B) The party initiating the termination gives 60 days' written notice of intention to terminate.

(b) Upon termination of the contract, the vendor shall immediately cease providing services to, and remove any direct service staff from the home of, any consumer whose services were covered by the contract.

(c) The provision of Title 17, Section 50611(d) shall remain applicable to any SLS contract termination.

§ 58680. Regional Center Requirements.

(a) The regional center shall, with respect to the procedures adopted pursuant to Section 58671(c) for monitoring and evaluating a SLS vendor's provision of service:

(1) Assure that the requirements of Welfare and Institutions Code, Section 4689(e)(1) through (5), are met;

(2) At least quarterly conduct a face-to-face meeting with each SLS consumer and, when appropriate, the consumer's personal advocate. The meeting shall occur in the consumer's home, except when the consumer withholds permission;

(3) Give significant weight to the evaluation results in any decision to renegotiate, terminate for cause, or renew an existing contract with the SLS vendor; and

(4) Retain and make available to the Department for a period of at least three years from the date of an evaluation, all records related to the evaluation.

Harbor Regional Center Service Policy Supported Living

Definition:

Supported Living Services increase the likelihood that persons with disabilities may live in homes of their own choice by organizing and coordinating an array of supports.

Supported living promotes individualized community living arrangements which are typical of those in which persons without disabilities reside. Supported living has the following characteristics:

1. people choose where and with whom to live in settings typical of non-disabled peers; people determine the routines, create the home atmosphere, make decisions about who will enter and who will live there, develop their own rituals and celebrations and have a feeling of ownership
2. a combination of natural supports (neighbors, families, friends, roommates, etc.), community supports (community services and organizations such as religious organizations and social clubs), "generic" supports (personal care assistance through In-Home Supported Services, Supplemental Security Income (SSI) etc.), environmental adaptations (push button telephones, beepers, computers, switches, intercom systems, audio and video tape recorders, and other technology), other formal supports (professional services, skills training and other purchased services and supports) are provided to ensure that a person's support needs are met and personal preferences are respected
3. services and supports focus on individual capabilities and strengths and are furnished where a person lives and within the context of his/her day-to-day activities
4. supported living encourages interdependence and enables people to experience the value of relationships within families, neighborhoods and communities
5. housing and support services are not provided by the same organization so that the individual's home is not jeopardized by a change in his/her relationship to a supported living service provider

Philosophy:

Harbor Regional Center believes that if a client wants to live in his/her own home, it is up to the client, his/her family, his/her conservator, the regional center service coordinator and other members of his/her planning team to help him/her identify (through the person-centered planning process) what he/she will need in the way of supports and services in order to accomplish this goal. It is possible that, during this process, the need for purchased supports may be identified.

Policy:

Harbor Regional Center may purchase supported living services for a client only if all of the following criteria are met:

1. the client is at least 18 years of age;
2. the client and, where appropriate, his/her conservator, have, with full knowledge of the inherent risks, chosen supported living as the appropriate and desired living option;
3. the client has, or is eligible to receive, the financial resources necessary to pay for rent/mortgage, utilities, food, clothing and all other typical daily living expenses;
4. every feasible alternative source of service and support has been explored and utilized including natural supports, community supports and generic supports

Póliza de Servicios del Centro Regional Harbor Vivienda con Ayuda

Definición:

Los Servicios de Vivienda con Ayuda aumentan la probabilidad de que las personas con discapacidades puedan vivir en el hogar de su propia elección organizando y coordinando una serie de apoyos.

La vivienda con ayuda promueve arreglos individuales de vida comunitaria en los que son típicos de aquellos en las que residen las personas sin discapacidad. La vivienda con ayuda tiene las siguientes características:

1. Las personas eligen donde y con quien vivir en entornos típicos de los compañeros no discapacitados. La gente determina las rutinas, crea la atmosfera del hogar, toma decisiones sobre quien entrara y quien vivirá allí, desarrollara sus propios rituales y celebraciones y tendrá un sentimiento de propiedad
2. Una combinación de apoyos naturales (vecinos, familias, amigos, compañeros de habitación, etc.), apoyos comunitarios (servicios comunitarios y organizaciones tales como organizaciones religiosas y clubes sociales), apoyos “genéricos” (Asistencia de cuidado personal a través de Servicios de Apoyo en el Hogar, Ingreso Suplementario de Seguridad (SSI) etc.), las adaptaciones ambientales (teléfonos con botones, beepers, computadoras, interruptores, sistemas de intercomunicación, grabadoras de audio y video y otras tecnologías) otros apoyos formales (servicios profesionales, Capacitación de habilidades y otros servicios y apoyos comprados) para asegurar que se satisfagan las necesidades de apoyo de una persona y se respeten las preferencias personales.
3. Los servicios y apoyos se centran en las capacidades y fortalezas individuales y se proporcionan donde las personas viven y en el contexto de sus actividades cotidianas.
4. La Vivienda con ayuda fomenta la interdependencia y permite a las personas experimentar el valor de las relaciones dentro de las familias, barrios y comunidades.
5. Los servicios de vivienda y de apoyo no son proporcionados por la misma organización para que el hogar de la persona no se vea comprometido por un cambio en su relación con un proveedor de servicios de vivienda apoyada

Filosofía:

El Centro Regional Harbor cree que si un cliente quiere vivir en su propia casa, depende del cliente, su familia, su conservador, el coordinador de servicios del Centro Regional Harbor y otros miembros de su equipo de planificación para ayudarle a Él/ella identificar (a través del proceso de planificación centrado en la persona) lo que él/ella necesitara en el camino de apoyos y servicios para lograr este objetivo. Es posible que durante este proceso, de pueda identificar la necesidad de apoyo comprados.

Póliza:

El Centro Regional Harbor puede comprar tales apoyos para un cliente solamente si se cumplen todos los siguientes criterios:

1. El cliente tiene al menos 18 años de edad;
2. El cliente, y en su caso, su tutor, tienen con pleno conocimiento de los riesgos inherentes, que la opción de vivienda apoyada es la apropiada y deseada opción
3. El cliente tiene o es elegible para recibir los recursos financieros necesarios para pagar el alquiler/hipoteca, utilidades, comida, ropa y todos los demás gastos diarios típicos;
4. Se han explorado y utilizado todas las fuentes alternativas posibles de servicios y apoyo, incluyendo los apoyos naturales, los apoyos comunitarios, y los apoyos genéricos.



PURCHASE OF SERVICE GUIDELINE

10/25/2011	SUPPORTED LIVING SERVICES	FINAL
------------	---------------------------	-------

I. DEFINITION

Supported Living Services are those services and supports provided as often as, and as long as, needed to a consumer, regardless of degree of disability, which would enable him or her to reside in and have control of their home (or apartments) that they own, rent or lease [WIC 4689].

II. CRITERIA

ELARC shall provide information and education to consumers and their families about supported living principles and services [WIC 4689 subd. (d)].

Supported Living Services shall be provided when:

- A. 18 years or older and eligible for regional center services. *[The assessment of a consumer's needs may begin before 18 years of age (17 years and 9 months) to enable the consumer to move to his or her own home when he or she reaches 18 years of age [WIC 4689 subd. (c)].*
- B. Preferred living arrangement of consumer.
- C. Choice has been identified through the IPP process [Title 17 § 58613].
- D. Risks of endangerment to health, safety and well being are minimized [Title 17 § 58632].

III. AMOUNT OF SERVICE

The amount, frequency and duration of services are based upon the assessment, and implementation process outlined in Title

17, subchapter 19. Location of services shall be in their communities and his or her own rented, leased or owned home but not in the home of the parents or SLS vendor.

Rent, mortgage and lease payments of a supported living home and household expenses shall be the responsibility of the consumer and any roommate who resides with the consumer WIC 4689 subd (h).

ELARC shall not make rent, mortgage or lease payments on a supported living home or pay for household expenses of consumers receiving supported living services, except under the following circumstances;

- ELARC Executive Director or assigned designee verifies in writing that making the rent, mortgage or lease payments or paying the household expenses is required to meet the specific care needs unique to the individual consumer as set forth in an addendum to the consumer's individual program plan, and is required when a consumer's demonstrated medical, behavioral, or psychiatric condition presents a health and safety risk to himself or herself, or another [WIC 4689 subd. (i)(1)(A)].
- During the time period that ELARC is making rent, mortgage, or lease payments, or paying for household expenses, the supported living services vendor shall assist the consumer in accessing all sources of generic and natural supports consistent with the needs of the consumer [WIC 4689 subd. (i)(1)(B)].
- ELARC shall not make rent, mortgage, or lease payments on a supported living home or pay for household expenses for more than six months, unless ELARC finds that it is necessary to meet the individual consumer's particular needs pursuant to the consumer's individual program plan. ELARC shall review a finding of necessity on a quarterly basis and ELARC's Executive Director or assigned designee shall annually verify in an addendum to the consumer's individual program plan that the requirements set forth in subparagraph (A) continue to be met [WIC 4689 subd. (i)(1)(C)].
- If ELARC has been contributing to rent, mortgage, or lease payments or paying for household expenses and at the

time of the IPP, the planning team determines that these contributions are no longer appropriate, a reasonable time for transition, not to exceed six months shall be permitted. All paid roommates and live-in support staff are responsible for their share of the rent, mortgage, or lease payments and household expenses. "Household expenses" are defined as general living expenses and includes, but is not limited to, utilities paid and food consumed within the home (WIC 4689 subd. (j)).

- ELARC shall utilize the same supported living provider for consumers who reside in the same domicile, provided that each individual consumer's particular needs can still be met pursuant to his or her individual program plans WIC 4689 subd. (g).

IV. ALTERNATIVE FUNDING RESOURCES

While the resources listed below may not in all cases serve as alternative funding resources, they must be explored as supplemental funding resources in the development of a supported living arrangement.

- SSI, SSA, VA
- HUD
- IHSS
- Family, consumer and other private resources
- Other state and local generic resources

Effective July 1, 2009, WIC 4659 subd. (c) was amended to include that regional centers shall not purchase any service that would otherwise be provided through generic resources. ELARC shall first explore these resources including but not limited to: private insurance, private trusts, Medi-Cal, Medicare, California Children's Services, EPSDT, CHAMPUS, private health plans, HMOs, Veteran's Benefits, Department of Rehabilitation, Ability to Pay programs at county medical facilities, the Convalescent Aid Society and clinics, etc.

Effective July 28, 2009, WIC 4689 subd. (f), was amended to require that the planning team of a consumer receiving SLS confirm that all appropriate and available sources of natural and generic support have been utilized to the fullest extent possible.

ELARC is required to ensure SLS vendor administrative costs (as defined in section 57434 of Title 17) are necessary and reasonable, and that the most cost-effective of the rate methodologies is utilized to determine the negotiated rate for SLS vendors WIC 4689 subd. (k)(1).

V. PROCESS FOR PURCHASE OF SERVICE

- A. Prior to the IPP meeting, the service coordinator, acting as an informed resource, will provide to the adult consumer or his personal advocate, information regarding SLS and the availability of SLS as a living option for the consumer.
- B. If the consumer or his personal advocate selects SLS at the IPP meeting, the service coordinator will provide information regarding SLS providers so that the consumer may have a choice of providers. Welfare and Institutions Code section 4648 subd. (a)(6)(D) was amended to require the IPP planning team to review the cost of providing services or supports of comparable quality by different providers and to choose the least costly available provider, including transportation, who is able to accomplish all or part of the consumer's IPP consistent with the particular needs of the consumer and family as identified in the IPP. In determining the least costly vendor, the availability of federal financial participation shall be considered. The consumer is not required to use the least costly provider if it will result in the consumer moving from an existing provider of services or support to more restrictive or less integrated services and supports.
- C. An outcome based objective and corresponding plan will be made a part of the IPP. The plan will include referral for a comprehensive assessment [Title 17 § 58612] by a qualified SLS provider.
- D. The SLS provider will be responsible to develop a comprehensive SLS plan (component) which would be subject to review and approval by the planning team (at minimum composed of the service coordinator and the consumer and/or his personal advocate). The planning team may approve up to three months of transition programming with a guideline of 20 hours per month or a flat rate of approximately \$500 per month for three months as specified in the service contract.

- E. The SLS provider will be responsible to document activities and efforts to access all relevant natural and generic resources. The SLS provider shall provide assistance to a consumer who is a Medi-Cal beneficiary in applying for in-home supportive services, as set forth in Section 12300, within five days of the consumer moving into a supported living services arrangement WIC 4689 subd (n). Failure by the SLS provider to apply for generic resources in a timely manner may be cause for termination of the service contract.
- F. The SLS vendor will also be expected to follow implementation of all applicable SLS regulations including Title 17 sections 58614, 58615, 58620, Article 4 (Service Design), Article 5 (Standards for Vendors), Article 6 Sections 58651, 58652, 58653, Article 8 (SLS Contract Standards), and any other applicable sections of Title 17 Chapter 3 Subchapter 19 not otherwise cited.
- G. The monthly cost of services and supports, exclusive of the consumer's SSI/SSA contributions, etc., should not exceed the cost effective formula established in Title 17 section 58617.
- H. Authorizations of vendored SLS will be provided in compliance with Title 17, section 54349 (d) and (e).
- I. Upon its receipt, the SLS assessment will be shared with the consumer and his or her personal advocate.
- J. The service coordinator shall review the assessment for the following elements:
- A description of the consumer's needs, strengths and preferences.
 - A description of the services that the SLS provider will provide to meet those needs and preferences.
 - A review of the consumer's natural supports and a description of how to meet the consumer's needs and preferences.
 - A sample weekly schedule of services including how natural supports; e.g., IHSS, family, friends, fits into the schedule.
 - A proposed budget

- A description of the consumer's cash resources and a sample consumer budget demonstrating how the consumer will meet his/her financial obligations.
 - How generic resources will be accessed; e.g., special utility services, food banks etc.
- K. If the assessment is lacking in any of the above areas, the service coordinator will request a revised assessment to include the lacking information.
- L. The Service Coordinator (SC) will then route the chart, along with the assessment to the designated Community Services Specialist for consultation.
- M. The Community Services Division (CMSD) Specialist shall review the chart and assessment report and reply to the SC in writing on the form providing any information that the report is lacking.
- N. When the service provider revises the assessment report to include the missing information, a rate determination meeting will be held with participation by the SC, the Consumer Services Supervisor, the assigned CMSD Specialist and the CMSD Supervisor to discuss the costs related to providing the services and supports and to determine a rate to offer to the service provider. The SC will discuss with the service provider the rate the regional center is offering.
- O. In the interim, a core staffing will then be scheduled by the service coordinator which will include all parties considered necessary for reviewing the SLS arrangement and the Individualized Service Plan/Assessment. During the meeting the group will discuss, review, identify and provide recommendations for any possible health and safety issues and supports for the individual. Necessary parties would include, at least, regional center staff and the consumer and his personal advocate.
- P. When the regional center and the service provider mutually agree upon a rate, the SC completes an authorization (1-11) and submits a copy of it, along with the rate determination sheet and a Request for Vendorization to CMSD. The assigned CMSD Specialist completes and routes a UFS data entry form with the 1-11

copy and Request for Vendorization to Rates and Vendorization to be added to the database (SANDIS).

Q. ELARC's fiscal administration processes the 1-11.

VI. EVALUATION OF SERVICE EFFECTIVENESS

Consumer/family feedback will serve as the primary mode of evaluation of service effectiveness. Such feedback will be formally obtained through the quarterly review and report on progress towards the IPP objectives developed through the person centered planning meeting. The annual review of this plan will also provide the opportunity to evaluate the effectiveness of the service.

ELARC shall monitor and ensure the quality of services and supports provided to individuals living in homes they own or lease WIC 4689 subd. (e)(1-5).

SLS providers will also be evaluated per Article 9 (Performance Evaluations) of the SLS regulations and be subject to necessary and appropriate sanctions as defined by regulation due to failure to provide SLS in the manner prescribed by regulation and WIC section 4689.



TITLE: Supported Living Services Service Standard

DOCUMENT: Service Standard

DATE REVISED: Approved by the Board of Directors on 10/28/09

Approved by the Department of Developmental Services on 1/25/11

Revision approved by the Board of Directors on 2/16/12

Revision approved by the Department of Developmental Services on 5/10/12

Revision approved by the Board of Directors on 9/26/12

Approved by the Department of Developmental Services on March 4, 2013

Supported living services (SLS) assist an individual with disabilities to live in a house, apartment or condominium which he owns or leases and to participate in the life of the community according to his needs and preferences. A person with a developmental disability may receive supported living services (SLS) to enable him to reside in an individualized living arrangement of his choice in the community if he is at least 18 years old, has expressed a preference for SLS during the IPP process and the living arrangement is not the residence of the client's parent or conservator.

Clients selecting supported living as a desired option are expected to have adequate financial resources to pay move-in costs, rent utilities, food and other expenses normally incurred by people living in their own home. (See the LRC policy on rent subsidy for circumstances under which an exemption may occur.)

The total annual cost of services purchased for a client in supported living:

- 1) may not exceed the annual cost of all regional center-funded services and supports that would be provided if the client were served in a licensed residential facility of an appropriate level or that are being provided if the client is living in a licensed residential facility of an appropriate level¹, or

¹ If two or more clients live in the same setting and receive services from the same SLS provider, this requirement is considered to be met for all clients if the average (mean) cost for the group of clients satisfies this requirement.

- 2) is within the range of annual costs of supported living arrangements for other clients with comparable needs who are currently receiving SLS from the regional center.

To ensure that clients in or entering into supported living arrangements receive the appropriate amount and type of supports to meet the person's choice and needs as determined by the IPP team, and that generic resources are utilized to the fullest extent possible, the IPP team shall complete a standardized assessment questionnaire at the time of development, review or modification of a client's IPP. The questionnaire shall be used during the individual program plan meetings, in addition to the SLS provider's assessment, to assist in determining whether the services provided or recommended are necessary and sufficient and that the most cost-effective methods of supported living services are utilized.

Regional center-funded services complement generic and natural supports such as In-home Supportive Services (IHSS), subsidized housing and the involvement of family and friends. For clients who are eligible for Medi-Cal, the SLS provider shall assist the client to apply for IHSS no later than 5 days of the client's move into his own home. The regional center does not provide supportive services for a client who meets the criteria to receive IHSS but refuses to apply for this benefit or utilize the benefit if eligible. The regional center executive director may waive this requirement if it is determined that there are extraordinary circumstances and those circumstances are documented in an addendum to the client's IPP.

For all individuals sharing a home and requiring supported living services, the same supported living service provider shall be used as long as that provider is able to meet each individual's needs pursuant to his IPP. The regional center shall consider, in consultation with the service agency, whether tasks (such as meal preparation, shopping and laundry) can reasonably be completed for more than one client with the support of a single support worker. If the decision is that they can be completed with this level of support, the regional center shall purchase the prorated share of the activity for each client.

The regional center may contract with an agency or individual for up to three months prior to a client's anticipated move into his own home in order to assist the client to secure an appropriate residence and arrange support services.

Authorization for supported living services is for a 12-month period and may be renewed based on review by the IPP Team.

Termination of Purchased Services

Purchased services are terminated under the following circumstances:

- The client no longer requires paid supports to live in the community.
- The client no longer wishes to live on his own in the community.

- The client no longer has the financial resources to cover his living expenses and does not qualify for a rent subsidy through an exemption.

NLACRC

SUPPORTED LIVING SERVICES

DEFINITION

Supported living services (SLS) afford consumers the opportunity to live in homes they rent, lease, or own with support services available to the consumer in his or her residence as often and as long as needed. This service model allows the consumer to remain in his or her own home even if the support needs of the consumer change, provided that this is the consumer's preferred living option as documented on the IPP.

The range of SLS and supports available include, but are not limited to: assessment of consumer needs; assistance in finding, modifying and maintaining a home; facilitating circles of support to encourage the development of unpaid and natural supports in the community; advocacy and self-advocacy facilitation; development of employment goals; social behavioral, and daily living skills training and support; development and provision of 24-hour emergency response system; securing and maintaining adaptive equipment and supplies; recruiting, training, and hiring individuals to provide personal care and other assistance, (including in-home supportive services workers, paid neighbors, and paid roommates); providing respite and emergency relief for personal care attendants; and facilitating community participation.

A consumer is eligible for SLS upon a determination made through the IPP process that the consumer:

- Is at least 18 years of age.
- Has expressed directly or through the consumer's personal advocate, as appropriate, a preference for:
 - SLS among the options proposed during the IPP process, and
 - Living in a home that the consumer chooses and is not the place of residence of a parent, conservator, or caregiver of the consumer. Consumers will not be denied eligibility for SLS solely because of the nature and severity of their disabilities.

POLICY

It is the policy of NLACRC to support consumers in their choice of living options. SLS are such an option and NLACRC will work with adult consumers and/or their family members to develop individualized supported living service plans that reflect the consumer's choices about where and with whom he or she lives as well as the selection of service providers.

Plans must include an assessment of the consumer's preferences and needs (inclusive of comprehensive strategies to ensure the availability of paid and unpaid members to comprise the consumer's circle of support group), strategies that detail how the consumer's emotional, social and recreational needs will be met, and schedules of amounts and types of training and support activities to be provided. Finally, the provision of SLS must be effective in meeting the goals and objectives contained in the consumer's IPP and be a cost-effective use of public funds.

NLACRC will confirm that all appropriate and available sources of natural and generic supports have been utilized to the fullest extent possible for a consumer living in a supported living arrangement.

Effective July 1, 2011, for consumers receiving SLS who share a household with one or more adults receiving SLS, NLACRC will consider whether efficiencies in the provision of service may be achieved if some tasks are shared, meaning the tasks can be provided at the same time while still ensuring that each person's individual needs are met. These tasks shall only be shared to the extent they are permitted under the Labor Code and related regulations. At the time of development, review, or modification of a consumer's IPP, for housemates currently in a supported living arrangement or planning to move together into a supported living arrangement, or for consumers who live with a housemate not receiving supported living services who is responsible for the task, NLACRC will consider, with input from the service provider, whether any tasks, such as meal preparation and cleanup, menu planning, laundry, shopping, general household tasks, or errands can appropriately be shared. If tasks can be appropriately shared, NLACRC will purchase the pro-rated share of the activity. Upon a determination of a reduction in services, NLACRC will inform the consumer of the reason for the determination, and shall provide a written notice of fair hearing rights pursuant to Welfare and Institutions Code, Section 4701.

STANDARDIZED ASSESSMENT QUESTIONNAIRE

To ensure that consumers in or entering supported living arrangements receive the appropriate amount and type of supports to meet the person's choice and needs as determined by the IPP team and that generic resources are utilized to the fullest extent possible, the IPP team shall complete a standardized assessment questionnaire at the time of development, review, or modification of a consumer's IPP.

The questionnaire shall be used during the team meetings, in addition to the provider's assessment, to assist in determining whether the services provided or recommended are necessary and sufficient and that the most cost-effective methods of supported living are utilized.

The IPP team shall utilize the standardized assessment questionnaire developed and provided to the regional centers by the Department of Developmental Services.

RENT, MORTGAGE, AND LEASE PAYMENTS

Rent, mortgage, and lease payments of a supported living home and household expenses are the responsibility of the consumer and any roommate who resides with the consumer.

NLACRC shall not make rent, mortgage, or lease payments on a supported living home, or pay for household expenses of consumers receiving SLS, except under the following circumstances:

- The executive director of the regional center verifies in writing that making the rent mortgage, or lease payments or paying for household expenses is required to meet the specific care needs unique to the individual consumer as set forth in an addendum to the

consumer's IPP, and is required when a consumer's demonstrated medical, behavioral, or psychiatric condition presents a health and safety risk to himself or herself, or another.

- During the time period that regional center is making rent, mortgage, or lease payments, or paying for household expenses, the SLS vendor shall assist the consumer in accessing all sources of generic and natural supports consistent with the needs of the consumer.

NLACRC shall not make rent, mortgage, or lease payments on a supported living home or pay for household expenses for more than six months, unless NLACRC finds that it is necessary to meet the consumer's particular needs pursuant to the IPP. The regional center shall review a finding of necessity on a quarterly basis and the executive director shall annually verify that the requirements set forth in paragraph (1) above continue to be met. If NLACRC has been contributing to rent, mortgage, or lease payments or paying for household expenses prior to July, 1 2009, the service coordinator shall, at the time of IPP review, determine if these contributions are still needed. If these contributions are no longer appropriate, a transition plan to end regional center's contributions (not to exceed 6months) is permitted.

Supported Living Services

Definition

Supported Living is a program model that has proven extremely effective in assisting persons to live in homes of their own choice in the community, regardless of the severity of the challenges of the individual. The model is highly individualized, and draws upon a system of supports and adaptations to the home environment to help overcome or compensate for those challenges. It has been successfully provided to many individuals who would have previously been placed in more restrictive residential settings.

The range of supported living services and supports available includes, but is not limited to: assistance in finding, modifying and maintaining a home; facilitating circles of support to encourage the development of unpaid and natural supports in the community; advocacy and self-advocacy facilitation; development of employment opportunities; social and daily living skills training and support; provision of 24 hour emergency response systems; securing adaptive equipment and supplies; recruiting and training individuals, paid or unpaid, to provide personal care and other assistance; and facilitating community participation.

Inherent in the Supported Living model is the belief that individuals with developmental disabilities have the right to choose where and with whom they live, and to live in homes typical of the non-disabled population. It is also believed that these individuals have the right to make decisions and participate in setting their own routines, in creating the structure and design of their living environment, and in choosing who comes into their home, and who provides support. It is believed that individuals benefit from community participation, at whatever level they are capable. It is also believed that learning is most effective when it takes place in the environment to which it applies. Therefore, all services and supports are provided in the context of the home and community environment.

Supported Living works best when an individual is part of an adequate circle of support that includes strong natural bonds of commitment that come from developed relationships. Therefore, an integral part of Supported Living is assistance to develop and strengthen natural support systems, whether they be family, friends, neighbors, or other individuals in the community. In addition, where necessary, individuals are provided more formalized paid supports. In some cases 24-hour care and supervision may be provided. The service is ongoing for those who need continual supports.

Policy

Westside Regional Center has a sincere commitment to the concept of supported living. Through experience with this service model, we have validated that given the proper supports to live in one's own home, any individual, despite the intensity of challenges, does benefit from the more individualized services that Supported Living offers. In

addition to providing funding for paid supports under this service, the Center has pioneered innovative approaches to support this model. The H.O.M.E. Corporation was established to purchase homes and apartment buildings that can be offered at affordable prices to consumers of Westside Regional Center. The Achievable Foundation was established as the fundraising arm of the Center and has awarded grants to assist consumers who receive Supported Living services. For some individuals the supports required for Supported Living could be extensive. In the interest of providing the best living options for individuals within a framework of cost effectiveness, the following criteria are used to determine if funding can be provided to allow an adult consumer to live in his/her own home in the community:

- **The planning team of a consumer receiving SLS confirm that all appropriate and available sources of natural and generic supports have been utilized to the fullest extent possible; that regional centers utilize the same SLS provider for consumers residing in the same domicile, provided that each consumer's particular needs can still be met pursuant to his or her IPP; and that the consumer, and any roommate, make all rent, mortgage, or lease payments and be responsible for household expenses.**
 - Westside Regional Center will provide Supported Living Services to those persons for whom the projected annual cost of the consumer's supported living arrangement does not exceed the total annual cost of Regional Center funded services and supports that would be provided if the consumer were served in an appropriate licensed residential facility. *Total cost of services*, for purposes of this criterion, includes the cost of the supported living services plus all additional costs for day programs, transportation, and other support services.
 - **Westside Regional Center will not purchase supportive services for a consumer who meets the criteria to receive, but declines to apply for, IHSS benefits, and from purchasing SLS to supplant IHSS. Between the date a consumer applies for IHSS and the date that a consumer's application for IHSS is approved, Westside Regional Center shall not purchase supportive services for the consumer at a rate that exceeds the IHSS hourly rate. The Westside Regional Center executive director may waive the requirement for a consumer to apply for IHSS if the executive director finds that extraordinary circumstances warrant the waiver, and that a finding is documented in an addendum to the consumer's IPP.**
 - **Westside Regional Center may make rent, lease or mortgage payments or assist with household expenses for a consumer in SLS not to exceed six months, with certain exceptions. To do so, Westside Regional Center's executive director must verify in writing that making the rent, mortgage, or lease payments or paying for household expenses is required to meet the specific care needs unique to the individual consumer as set forth in an addendum to the consumer's IPP. and is required when a consumer's demonstrated medical, behavioral, or psychiatric condition presents a health and safety risk to himself or herself, or another. In addition. during the time**
-

period that a regional center is making rent, mortgage, or lease payments, or paying for household expenses, the SLS vendor must assist the consumer in accessing all sources of generic and natural supports consistent with the needs of the consumer. Westside Regional Center shall not make rent, mortgage, or lease payments on a supported living home or pay for household expenses for more than six months, unless the regional center finds that it is necessary to meet the individual consumer's particular needs pursuant to the consumer's IPP. The regional center shall review a finding of necessity on a quarterly basis and the regional center executive director shall annually verify in an addendum to the consumer's IPP that the requirements noted above continue to be met.

The following guidelines should be considered when determining if Supported Living Services is the most appropriate service option for achieving quality of life for the individual, including protection and enhancement of the individual's health and safety:

1. The individual is 18 years of age or older and has indicated the desire and motivation to increase his/her independence in living.
2. The individual has, or is eligible to receive, financial resources necessary to pay for rent/mortgage, utilities, food, clothing and all other typical living expenses, unless an exception is granted per number two above.
3. The individual and, where appropriate, his/her parent or conservator, have chosen supported living services, and have full understanding of any risks.
4. The likelihood exists, given the individual's life circumstances and identified potential resources, that sufficient natural supports can be developed to build a full compliment of support resources and avoid total reliance on paid supports.
5. Appropriate services and supports can be identified and are available as needed to protect the health and safety of the individual and of others if he or she has:
 - a. Life-threatening medical conditions,
 - b. The need for continuous nursing care,
 - c. The need for constant supervision because of uncontrolled seizures,
 - d. Physical limitations that require 24 hour personal assistance, or behaviors that could result in a threat to the health or safety of self or others, could result in extensive property destruction or the need for law enforcement intervention, or would likely result in repeated evictions.

SCLARC POS Funding Standards

FUNDING STANDARDS Supported Living Services

SUPPORTED LIVING SERVICES

Service Code: 896 - Supported Living Services

Supported Living Services (SLS) are those services provided by agencies or individuals that support adults' efforts to live in their own homes, participate in activities to the extent of their interests and capacities, and realize their maximum potential. Individuals reside in settings that are typical of those in which persons without disabilities reside. Support services, which may change, are provided based on individual needs for as long as needed. In supported living arrangements, the regional center funded services complement generic and natural supports such as In Home Support Services (IHSS), subsidized housing, and the involvement of family and friends. In cases where regional center funding is needed prior to the start of IHSS, the rate shall be at the established IHSS rate for the county of residence. Supported Living Services shall not be purchased to supplant IHSS or in cases when an otherwise qualified individual refuses to apply for IHSS.

The IDT shall confirm that all appropriate and available sources of natural and generic supports have been utilized to the fullest extent possible. The same supported living provider shall be used for all individuals residing in the same home provided that each individual's particular needs can still be met pursuant to his/her IPP.

Rent, mortgage, lease payments and household expenses shall be the responsibility of the individual and any roommate who resides with that person.

A supported living services provider shall provide assistance to an individual who is a Medi-Cal beneficiary in applying for In-Home Supportive Services within 5 days of the person moving into a supported living services arrangement. Referral to supported living agencies is determined through the IPP process.

SCLARC POS Funding Standards

Eligibility for SLS

An individual shall be eligible for SLS upon determination made through the IPP process that the individual:

- (a) is at least age 18 year of age (planning may begin prior to age 18);
- (b) has expressed directly or through the individual's personal advocate a preference for SLS among the options proposed during the IPP process
- (c) is living in a home that is not the place of residence of a parent or conservator of the individual.

Individuals shall not be denied eligibility for SLS solely because of the nature and severity of their disabilities.

The IDT must review the SLS assessment and the support plan to assure that:

- (a) the recommendations are appropriate to meet the goals of the IPP
- (b) all regulatory requirements that pertain to supported living arrangements must be met.

I. Definition

Adults with Developmental Disabilities, regardless of the degree of the disability, have the right to live in homes of their own choice, as long as they want and with whom they want, and to be provided with services that will ensure and enhance their success with integration into the mainstream of society. Supported Living Services (SLS) is a shift in thinking for programs and funding agencies from valuing time limited, measurable, instructional and behavioral goals to valuing choices, needs and satisfaction of people with disabilities.

It is the goal of the Supported Living Services program to provide services according to consumer preference and interest and to assist with generic services and supports in the consumer's natural community, in the most cost-effective manner possible. Therefore, the program will address the identified consumer need and preference, obtained through the Person Centered IPP process and individualize and customize services and supports, rather than trying to "fit" the consumer into a previously established program.

SCLARC POS Funding Standards

Consumers, regardless of the level of functioning, are eligible for supported living services.

Supported Living is **NOT** Independent Living. Although there are similarities and crossover services, the two (2) programs are clearly different, and one should not be confused with the other. Supported Living Service is not time limited as is Independent Living.

II. Criteria

The Service Coordinator shall obtain a review with recommendations for referral to Supported Living from the Planning Team, which must include the appropriate consultant(s), prior to submission of funding request. The type and amount of support shall be based upon a consumer's assessed needs. Such needs should relate to success in living in a minimally restrictive environment. An initial assessment [i.e. no more than 10 hours] and ongoing services shall not exceed the monthly maximum allowed. The IPP Planning Team, after consultation with vendor, should indicate on the authorization, the number of hours per month needed for each consumer and not merely indicate the maximum hours allowed. This will avoid encumbering unnecessary funds.

III. Procedure for Review

The Service Coordinator shall convene the Interdisciplinary Review Team for a review thirty days after the consumer has moved into the Supported Living situation and shall complete the "Six Month Review of Supported Living Services (including comments describing strategies for addressing items not being met by the vendor)." If major problems are identified, the Service Coordinator shall convene another meeting of the Interdisciplinary Review Team, including Community Support Unit staff as needed to develop a plan to address the identified problems.

Supported Living Services

The intent of supported living services is to provide opportunities for adults with developmental disabilities, regardless of the degree of disability, to live in homes that they own or lease with support available as often and for as long as it is needed. The purpose of providing services and supports shall be to assist that individual to exercise choice in his or her life while building vital and long-lasting relationships with other individuals. While independent living skills are designed to provide instruction to develop specific skills, supported living services are offered for as long and as often as needed, with the flexibility required to meet a person's changing needs in his or her home over time.

Adults will be supported in living arrangements which are typical of those in which persons without disabilities reside. Services and supports shall change as needs change (without requiring a move from their homes.)

Supports and services purchased by the regional center would generally be expected to decrease over time as natural supports are developed and generic resources are accessed with the assistance of service providers.

Individuals shall have control over the environment within their own homes, where and with whom they live. Services and supports shall be flexible and tailored to individual needs and preferences.

The range of supported living services and supports available include but are not limited to:

- Assessment of needs
- Assistance in finding, modifying and maintaining a home for the individual
- Facilitating circles of support to encourage development of unpaid and natural supports in the community
- Advocacy and self-advocacy facilitation
- Development of employment goals
- Development and provision of 24-hour emergency response systems
- Securing and maintaining adaptive equipment and supplies
- Recruiting, training, and hiring individuals to provide personal care and other assistance, including In-Home Support Services (IHSS) workers, paid neighbors, and paid roommates
- Facilitating community participation
- Instruction and training in skills such as cooking, cleaning, shopping, menu planning, money management, mobility training, and sexuality training

Services and supports provided in the process of assessing and assisting an individual to arrange services may be funded for up to 60 days prior to the actual move in date to the adult's own home

Supported living services and supports must be cost-effective Therefore, the regional center costs for supported living services should not exceed the cost of the most appropriate licensed residential facility for each individual client, as specified in the California Code of Regulations In-Home Support Services (IHSS) and/or other sources of support are taken into consideration in determining services funded by the regional center Regional centers shall not purchase supported living services for an individual who is eligible for IHSS benefits but refuses to apply Regional centers shall not purchase supported living services to supplant IHSS

Planning for your future

A ROADMAP TO YOUR GOALS



Planning for your future

PLANNING FOR YOUR FUTURE. Soon your Harbor Regional Center Counselor will meet with you and the important people in your life. This meeting is a chance for you and your family and friends to sit down and think about where you are now, where you want to be in the future, and what support you might need to help you get there. If you fill out this form, or even if you just think about some of the questions it asks, you will be better prepared for your planning meeting. You can fill out this form by yourself, or you can ask a family member or friend to help you fill it out or just think about it together. If you don't want to fill out this form, that is okay too.

However, we think that you will find it useful and fun too!

This is about you. What is your name? _____

Who is on your team? Who helps or supports you? Who are your friends? Whom do you turn to for help when you need it? Whom do you want to invite to your planning meeting? _____

THINGS ABOUT YOU

About you

1. What are some great things about you? What do people like about you?

What can you do well? _____

2. What things do you like to do? Around town? At home? For fun? _____

3. What NEW things would you like to do? Around town? At home? For fun? _____

4. What makes you happy? _____

5. What makes you mad or sad or frustrated? _____

6. Who is your favorite person to talk to and do things with? (You can name more than one person if you want to.) _____

THINGS ABOUT WORK. If you are not interested in working, please turn to page 4.

If you have never worked before, please skip to question #8. If you are already working, please skip to question #10.

7. If you have worked in the past, what jobs did you like best? _____

8. If you are interested in working, what kinds of jobs interest you? _____

9. Do you need help in getting a job? Yes No

Does it take you a long time to learn a job? Yes No

Do you get SSI? Yes No

Do you need help in using money or in using transportation to get to work? Yes No

If you answered “yes” to any of these questions, you may need some help in getting and keeping a job.

Already Working? How's Your Job?

10. Is it the kind of job you like? Yes No

Are the hours and days okay? Yes No

Do you get the support you need? Yes No

Are you satisfied with the amount of pay you get? Yes No

Do you get benefits from your job? Yes No

Is your job close enough to where you live? Yes No

Is there anything you need more help with? Yes No

How do you get along with the people at work? Great Okay Not very well

When you think about your job (check the one that shows how you feel most of the time)

You are glad that you got it It's okay that you got it You are sorry that you got it

THINGS ABOUT DAYTIME ACTIVITIES.

If you work during the daytime, skip to question #16.

11. If you are not working now, what do you do during the day? _____

12. What do you like best about what you do during the day? _____

13. What are the things you don't like about what you do during the day? _____

14. If you go to a day program with other people with disabilities:

Do you like what you do at the day program? Yes No

If no, would you like a different day program? Yes No

15. If anything were possible, what would you most like to do during the day? _____

THINGS ABOUT WHERE & WITH WHOM YOU LIVE

16. How do you live now?

Alone? With one or more roommates? With your parents?

With other relatives? In a group home?

Other? _____

17. What do you see as the best things about where you live right now? _____

18. What are the things that you don't like about where you live right now? _____

19. What kind of help do you need where you live right now? _____

20. Are you living where you want to live and with whom you want to live? Yes No

If no, explain: _____

If you are living where you want to live for now, please go to question #24.

21. If anything were possible, where would you like to live and with whom? _____

THINGS ABOUT YOUR HEALTH

22. How are you feeling? Do you have any health problems that concern you or your family?

23. Do you have a doctor and, if so, when did you last see him or her? What for?

24. Is the doctor treating you for something? Do you take any medications? If so, what are they?

25. Do you have a dentist and, if so, when did you last see him or her?

26. Do you need help going to the doctor or dentist, and if so, who helps you?

27. How tall are you and how much do you weigh? Do you think you weigh too much or too little? Are you on a special diet?

THINGS ABOUT YOUR SPIRITUAL LIFE

28. Do you go to a church or synagogue or other place of worship? Yes No
29. Do you need assistance in getting to your place of worship and, if so, who helps you?
 Yes No
-
-
30. If you do not go to church or another place of worship, is this something you would like to do? Yes No

THINGS ABOUT YOUR HELPERS

31. If you have a job, do you have someone like a “job coach” who helps you when you work? Yes No
- If you have a job coach, is it someone that you feel is helpful? Yes No
- If no, would you like a different job coach? Yes No
32. Do you have someone who helps you at home? Someone like a “supported living coach” who helps you budget your money, shop, cook and things like that? Yes No
- If you have a supported living coach, is it someone that you feel is helpful? Yes No
- If no, would you like a different supported living coach? Yes No
33. Do you have enough contact with your Harbor Regional Center Counselor? Yes No
- When you call your Harbor Regional Center Counselor, does he or she call you back in a reasonable time? Yes No
- Are you satisfied with your Harbor Regional Center Counselor? Yes No

34. Do you have any other helpers? If so, who are they and how do they help you? Are you satisfied with how they help you? Would you like help in finding someone different to assist you with these things?

THINGS ABOUT YOUR FUTURE

35. What are your hopes and dreams for the future? Think about what you want for yourself in the next year. What about three or four years from now?

36. What kinds of support will you need from your family, friends, neighbors, and others in the community who can help you reach your goals?

37. What kinds of support will you need from Harbor Regional Center to help you reach your goals?

38. What worries you most about your future?

39. If your family is not available, whom would you turn to for support? _____

OTHER THINGS THAT ARE IMPORTANT TO YOU. You can use this space to write about any other things that you think are important for the people who will help you plan for your future to know. _____



HARBOR
REGIONAL
CENTER

HARBOR DEVELOPMENTAL DISABILITIES FOUNDATION, INC.
21231 Hawthorne Boulevard, Torrance, CA 90503
(310) 540-1711 www.harborrc.org

A man in a white t-shirt is leaning on a table, smiling at the camera. The background is a slightly blurred indoor setting.

Living

A man with a goatee, wearing a black and white striped t-shirt, is sitting at a table playing dominoes. He is smiling at the camera. The background is dark and out of focus.

On Your Own

A Guide to Supported Living Services



Did You Ever Think About...

moving into a house or apartment in the community so you could be more independent? Sometimes people with developmental disabilities are afraid to think about living on their own because they believe they will have to do it all by themselves. We all need help to live on our own. Some people just need more help than others.

If you want to live in a house or apartment but don't think you can manage it on your own, supported living may be the answer. Supported living services are used by many adults with developmental disabilities to help them live as independently as

possible in the community. When you live on your own, you have all the responsibilities for running your own life that people without disabilities have. For example, you will make choices about where you live, whom you live with, how you spend your time, and how you spend the money you have left after you pay your rent and other regular bills.

What kind of support do you think you would need to live on your own? Would you need someone to help you learn to shop, cook, or handle your money? Would you need help with planning your doctor appointments? Do you have physical challenges (such as using a wheelchair) so that you need help with bathing and dressing? Whatever your needs, supported living may be right for you.

In this booklet, we answer eight questions that clients and their families often ask about supported living. The answers to these questions can help you decide if you would like to try living more independently.

- What Are Supported Living Services?
- Who Provides Supported Living Services?
- Who Is Eligible For Supported Living?
- Will I Get All Of My Support From The Supported Living Service Provider?
- Can I Live Alone Or Must I Have A Roommate?
- Will The Regional Center Pay My Rent Or Other Things If I'm In Supported Living?
- How Do I Get Started On The Road To More Independence?
- How Can I Learn More?

Supported living is not for everyone. Some people don't want to try it. Some people decide to try it and then choose not to continue. Still other people decide they want to try supported living sometime in the future, when they feel more ready. But most people who try supported living find that it opens up all kinds of new opportunities for them and they never want to go back to their old way of living. It's OK if you don't want to try to live on your own in a house or apartment, but you shouldn't be afraid to try. There are lots of people out there who want to help you. Your regional center Counselor is only one of them. Let's take a closer look at the kinds of help you can get.

WHAT ARE SUPPORTED LIVING SERVICES?

There is a very easy way to describe the services you may receive in supported living: it is whatever help you need to make it possible for you to live in a home of your own choice in the community. You can get help with taking care of your home, taking care of your personal needs, using community services, or just about anything else.



Supported living services are "individualized." This means they are different for each person, depending on what the person needs and wants. For example, if you just need help to pay bills, you could have a person come to your home to work with you on paying your bills and balancing your checkbook. If you need more support – for example, someone to help you prepare meals, do laundry, or clean the house – you can get that, too. If you just need to be reminded each morning to take your medicine, someone would help you come up with a system that will help you remember.

When you first move into your own place you will probably need more help than after you've been living on your own for awhile. What kind and how much help you receive at any time is based on how much you can do for yourself and how much help you need to do things. It will be up to you and your planning team working together to decide what services and supports you might need and how those needs will change as you learn to be more independent. Supported living services can help people in four different ways:

They help you develop skills. These services help you learn to do things that allow you to be more independent. This includes skills needed to take care of a home (cooking, cleaning, etc.), skills needed to get around in the community (using public transportation), and skills needed to look after your personal needs (bathing, personal hygiene, etc.) and to stay healthy (making doctor appointments, taking medication, eating right, etc.).

They give you support in things that you can't learn to do on your own. If it turns out that you are not able to learn some of the skills, or if it looks like training is not the right course for some of the things you need to do, then people will make a plan to give you support in these areas. For example, if you are unable to learn to pay bills or balance your checkbook, someone can come to your home regularly to help you do it. If you need personal assistance with things like eating, bathing, and getting around the house, the supported living provider can help you find someone to give you this kind of help.

They make sure you have help in emergencies. Everyone in supported living has someone he can call in case of an emergency at any time of the day or night. Some of this assistance may be provided by family or friends, but the supported living agency will also assist with emergency back-up if needed.

They help you connect to other services and supports. A person living in the community may have a range of other needs. For example, you may want help with things such as signing up for a class at your local community college, finding a dentist who accepts Medi-Cal, getting your name on the waiting list for renters' assistance (Section 8 housing), or learning parenting skills. The supported living instructor will help you find out where you can get these services within your neighborhood or community, and he can even help you make any appropriate applications, fill out any necessary forms, etc.

At the end of this booklet we talk about "Guidelines for Supported Living Services." We asked a large number of people from the Harbor Regional Center area to describe what they thought a really good supported living service would be like. The people we asked were clients in supported living, their families, regional center Counselors, and people who provide supported living services.

We put together what all these groups told us and came up with a list of things that everybody agreed on. If you read this list, it will help you understand better what supported living services are. When you talk to supported living providers about their services, you may want to take this list with you and ask them if they do these things.

WHO PROVIDES SUPPORTED LIVING SERVICES?

Supported living services are provided through an agency. For example, Harbor Regional Center works with providers with names like *LifeSteps*, *Independent Visions*, and *Independent Focus*. These agencies have lots of people working for them, but a client receiving supported living services usually has only one person that he works with. This person is called his supported living instructor.

The supported living instructor helps the client learn the things he is able to learn and helps him find support to do things that he will always need help doing. He may also help the client find other agencies that can provide him with certain services.

The client may have another person coming into his home regularly to help him with self-care and the daily responsibilities of running a home if the client is unable to do them. This person provides In-home Supportive Services (IHSS). Usually a person with physical disabilities gets this kind of service. The supported living instructor can help the client apply for IHSS and then hire an IHSS attendant to assist him as needed in the home.

WHO IS ELIGIBLE FOR SUPPORTED LIVING SERVICES?

If you are a Harbor Regional Center client over the age of 18 and interested in living on your own, you are eligible for supported living. Your Counselor will talk to you and your family to make sure you understand what living on your own means. The Counselor will discuss with you what responsibilities go along with supported living. For example, you will be expected to have enough money to pay rent or a mortgage, utilities like electricity and gas, and other daily living expenses. The Counselor will also discuss with you what challenges there might be for people living on their own in the community. Once you and your family understand what supported living will mean for you, you may choose to try it.

WILL I GET ALL OF MY SUPPORT FROM THE SUPPORTED LIVING SERVICE PROVIDER?

Some of the things that people in supported living need help with are the kinds of things that their friends or family members can help with. These might be things such as taking you to church, helping decorate your apartment, taking you grocery shopping, or giving you a ride to work, the library, or your health club. When people help you do things like this, it is called getting "natural support."

For things that family and friends cannot do, the supported living instructor will help you. The two of you will set up a schedule for him to come regularly to your home. He will help you learn new things and give you support when you need it. If you qualify for IHSS services you will also have a personal attendant coming into your home to help you with self-care and perhaps other things.

CAN I LIVE ALONE OR MUST I HAVE A ROOMMATE?

While people in supported living do not have to have a roommate, most do. They have roommates for two reasons. The first is that often it is not possible for a person to afford to live alone. Once they have paid their rent and other regular expenses, they have no money left to buy things they want or go out with their friends. Having a roommate means you will only have to pay half the rent and half the utilities. If you and your roommate decide to cook and eat together, you can also save money on food. The second reason people usually have a roommate is so they have someone to talk to and do things with.

WILL THE REGIONAL CENTER PAY MY RENT OR OTHER THINGS IF I'M IN SUPPORTED LIVING?

If you want to live in your own house or apartment in the community, it is very important for you to remember that you must have enough money to pay your expenses just like everyone else does. You will need to pay your own rent, gas and electric, food, and other regular expenses. You will also need to have a little money left over so you can do things like go out with your friends and buy clothes or things you like.

Your income may come from SSI or from a job, or from both. You may even be lucky enough to have family who can help you with your expenses. But, remember, the regional center does not pay rent for people in supported living. This is one reason that most people who choose to live this way have a roommate.

Your medical care would probably be paid for by Medi-Cal or, if you have a job with benefits, by your private medical insurance. If you have physical disabilities or other special needs, you may qualify for IHSS money that would allow you to hire someone to come into your home to provide personal assistance.

HOW DO I GET STARTED ON THE ROAD TO MORE INDEPENDENCE?

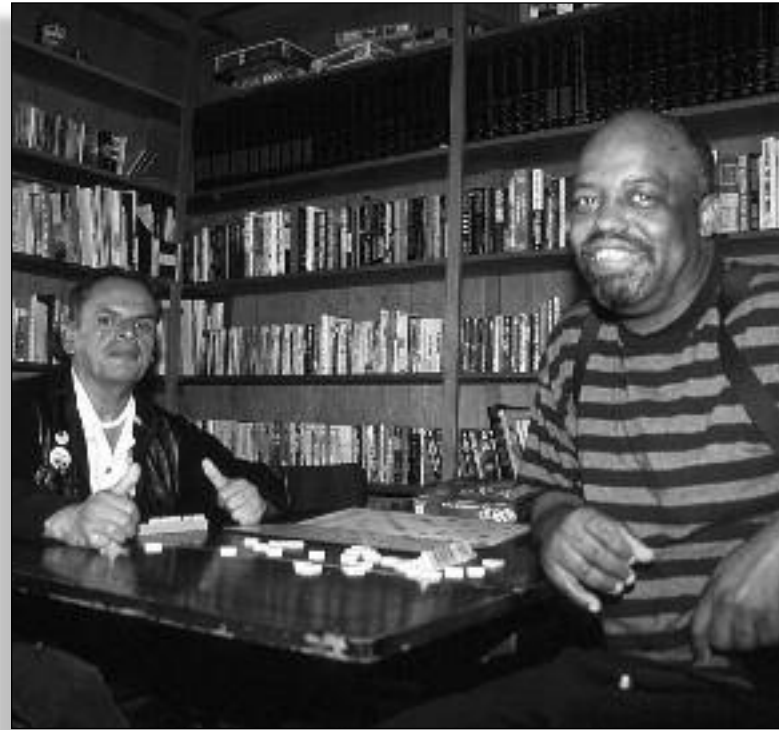
Whenever you make a big change in your life, you must plan ahead. Moving into supported living is just like any other big change. You need to give yourself plenty of time to prepare before you make the move. You will need at least six months and maybe as much as a year to do all the things you need to do. Let's look at what some of these things are.

Deciding where you want to live. It may take a long time to look around and decide what kind of a place you'd like to live in and where you'd like it to be. First of all, you will want to find a place that is not outside of your budget and you will want it to be in a safe neighborhood. You need to decide if you want to live close to your family or your job, close to shopping, or close to friends or places in the community that you visit often. You probably will want to be close to a bus line. Some people like to have a house with a yard so they can plant flowers or have a vegetable garden. Some people want to have a pet like a cat or a dog. You need to think about all of these things when choosing a place to live.

Finding a roommate. Most people in supported living have a roommate and it often takes a while to find someone you want to live with. If you can't afford to pay all of the rent by yourself, you will need to find a roommate before you move into your own place so you can share the expenses from the very beginning.

Learning a few important independent living skills. Having a few more basic skills may make your transition from where you are now to supported living smoother. For example, if you know how to cook a few simple meals before you move, you will be much better off than if you have to depend on other people for this. If nothing else, you will be able to eat when you're hungry rather than waiting for someone else. If you know where the local stores are, you will be able to do your own shopping right from the start.

Getting furniture and supplies. If you move into your own place, you will need your own furniture, dishes, pots and pans for cooking, and other things such as sheets and towels. It may take you a while to get all the things you need. You will probably get some of these things from your family or friends, but you may also need to buy some. Garage sales and flea markets are good places to look for things like this. And don't forget, you might need to save money to pay someone to move you into your new home, if you do not have friends or family who can help you with moving.



As you can see, there are lots of things to do and lots of things to think about when you decide you want to move out on your own. Just remember to give yourself time and don't think you have to do everything at once. Remember also that lots of people around you will be willing to help you plan your exciting move.

What does HOPE have to do with supported living? Harbor Regional Center works very closely with an organization called Home Ownership for Personal Empowerment, or HOPE, that provides affordable housing for HRC clients. HOPE buys houses and condos, fixes them up, and rents them at low rates to clients of Harbor Regional Center. (The rents are usually not more than about one-third of the renter's monthly

income.) In the year 2002, more than 70 adults with developmental disabilities were living in HOPE homes in Torrance, Long Beach, Lakewood and Bellflower. A special feature of these homes is that every resident has his or her own bedroom. Because the homes are owned by an organization set up only for this purpose, HOPE offers greater stability than most other community-based options. In other words, HOPE will most likely always be there for clients. If you would like to learn more about this program, ask your regional center Counselor to put you in touch with HRC's housing specialist.



HOW DO I LEARN MORE?

If you are interested in learning more about supported living or anything else discussed in this booklet, talk to your Harbor Regional Center Counselor. Ask her to arrange for you to talk with some supported living service providers so you can learn more about what services and supports are available.

Probably one of the best ways to help you decide whether you want to try supported living is to talk to some HRC clients who have been living this way for awhile. They can tell you about some of the challenges they had achieving their dream of living on their own. They can also tell you about how their lives changed as they became more independent. In the back of this booklet you will find a checklist of questions that you could ask of people in supported living. Also in the back of this booklet is a checklist of questions you might want to ask of the supported living service providers you talk to.

*AND FINALLY...*Remember what we said at the beginning of this booklet: It's OK if you don't want to live on your own, but you shouldn't be afraid to try. If you do decide to try, you'll have lots of help.

Harbor Regional Center

Guidelines for Supported Living Services

This document describes Harbor Regional Center's guidelines for supported living services. The guidelines reflect what supported living clients, their family members, regional center staff, and service providers have told us an ideal service would be like. Since the guidelines describe an ideal, we do not expect supported living services to be able to satisfy them all, currently. We do expect, however, that our supported living providers will work in partnership with us in the coming years to move their services steadily closer to the ideal.

Underlying these guidelines is the principle of client self-determination. People with disabilities make their own choices about how they live their lives, and these choices are respected. The primary purpose of supported living is to give clients the help they need to become as independent as possible and achieve the outcomes they choose for themselves. Client choice guides supported living services as long as these choices do not pose a threat to the client's health or safety.

MISSION

- The supported living service's (SLS) mission statement specifically promotes respect for people with disabilities and participation of these people in the community.
- SLS instructors know the mission statement and can explain how it affects what they do with clients.

CLIENT RIGHTS AND RESPONSIBILITIES

- Clients are entitled to receive supported living services without regard for their abilities and personal characteristics.
- The client's training and support schedule is set up to accommodate his needs and preferences.
- The client has the major role in selecting his SLS instructor and may request a change if he believes the match is not a good one.
- The client does not have to move out of his home if he requests a different SLS provider.
- The SLS asks the client to evaluate his relationship with his instructor and tell whether he is satisfied.
- The client knows the process for contacting the supported living service directly if he has concerns or is dissatisfied with his instructor.
- The SLS instructor makes sure that everyone supporting the client understands that the non-conserved client directs the services.
- The client gives consent before the SLS instructor talks to family members about the client's life.
- If the client wants his family to be involved in his life, the SLS instructor helps the client find appropriate ways for the family to do this.

CLIENT-INSTRUCTOR RELATIONSHIP

- If a client's SLS instructor is temporarily not available to work with him, the client receives services from a backup instructor whom he knows.
- If there is a need to change a client's SLS instructor, the client's regional center Counselor is involved to help the client make a smooth transition.
- The client and the SLS instructor communicate using the client's preferred language and method of communication.
- The client is able to contact his instructor or someone else from the SLS at any time through a pager or other messaging service.

CLIENT TRAINING AND SUPPORT

- The client receives assessment, training, and support as necessary, to help him do the following:
 - Stay safe from harm
 - Stay healthy
 - Get his bills paid and meet his other financial responsibilities
 - Develop and keep friendships and other personal relationships
 - Engage in activities of his choice at home and in the community
- A client who is a parent is helped to develop skills that will make her a better parent.
- A client is given a reasonable opportunity to master each skill and activity that he chooses as a goal.
- The SLS instructor helps the client interview potential roommates and screen, hire, and terminate personal attendants.
- The client participates in selecting his roommate.
- The SLS instructor maintains regular contact with the regional center, including attending the client's annual regional center planning meeting, attending quarterly review meetings, and submitting regular reports on the client's progress.
- The SLS instructor knows the client's medical needs and knows whom to contact for consultation about medical issues.

SLS INSTRUCTOR TRAINING AND SUPPORT

- SLS instructors receive initial employment training that includes:
 - Communication skills
 - Conflict resolution
 - Teaching techniques
 - Basic principles of how people learn
 - Assistive technology and how it may be helpful
- The SLS ensures that information about generic programs such as IHSS, SSI/SSA, HUD, and mental health services is readily available to instructors.
- The SLS instructor earns at least 150% of minimum wage.

- The SLS instructor is paid for at least 6 hours per month of non-direct care activities such as training and supervision.
- SLS instructors are encouraged to attend outside training conducted by the regional center or other organizations.
- Each SLS instructor is observed regularly in the community by his immediate supervisor.
- Each manager of the SLS observes staff in the community at least once a month.

QUESTIONS TO ASK PEOPLE IN SUPPORTED LIVING

1. How long have you lived in supported living?
2. What do you like about supported living? What don't you like?
3. What kinds of services and supports do you receive?
4. Does your supported living service provider do a good job of helping you find services and supports?
5. Do you have a roommate? Do you do things with your roommate at home like cooking and cleaning?
6. Do you do things in the community with your roommate like go out to eat, go out for coffee, go to the movies, or go shopping?
7. What do you do during the day?
8. What do you do for fun?
9. How do you use the community (for example, do you go to church, health club, stores, post office, the library)?
10. Have you been able to make friends?
11. Are you able to see your friends when you want to?
12. What have you learned to do in supported living?
13. Would you ever want to go back to living the way you did before? Why or why not?

QUESTIONS TO ASK SUPPORTED LIVING SERVICE PROVIDERS

1. What kinds of services do you provide to people?
2. What kind of training do you provide to clients?
3. What are some of the living arrangements your clients live in?
4. What kinds of things do clients do during the day?
5. How are clients involved in their neighborhoods?
6. What kinds of things do clients do for fun?
7. Do your clients receive support from different providers? What other providers do you work with?
8. What kinds of natural supports do your clients receive?
9. How do you handle emergencies?
10. What would happen if I didn't want some of the supports or services you suggest?



HARBOR DEVELOPMENTAL DISABILITIES FOUNDATION, INC.
21231 Hawthorne Boulevard, Torrance, CA 90503
(310) 540-1711 (888) 540-1711
www.HarborRC.org



It's All About

OPTIONS

**Living Alternatives For Adults
With Developmental Disabilities**



**HARBOR
REGIONAL
CENTER**

At Harbor Regional Center, we have a vision for the future.

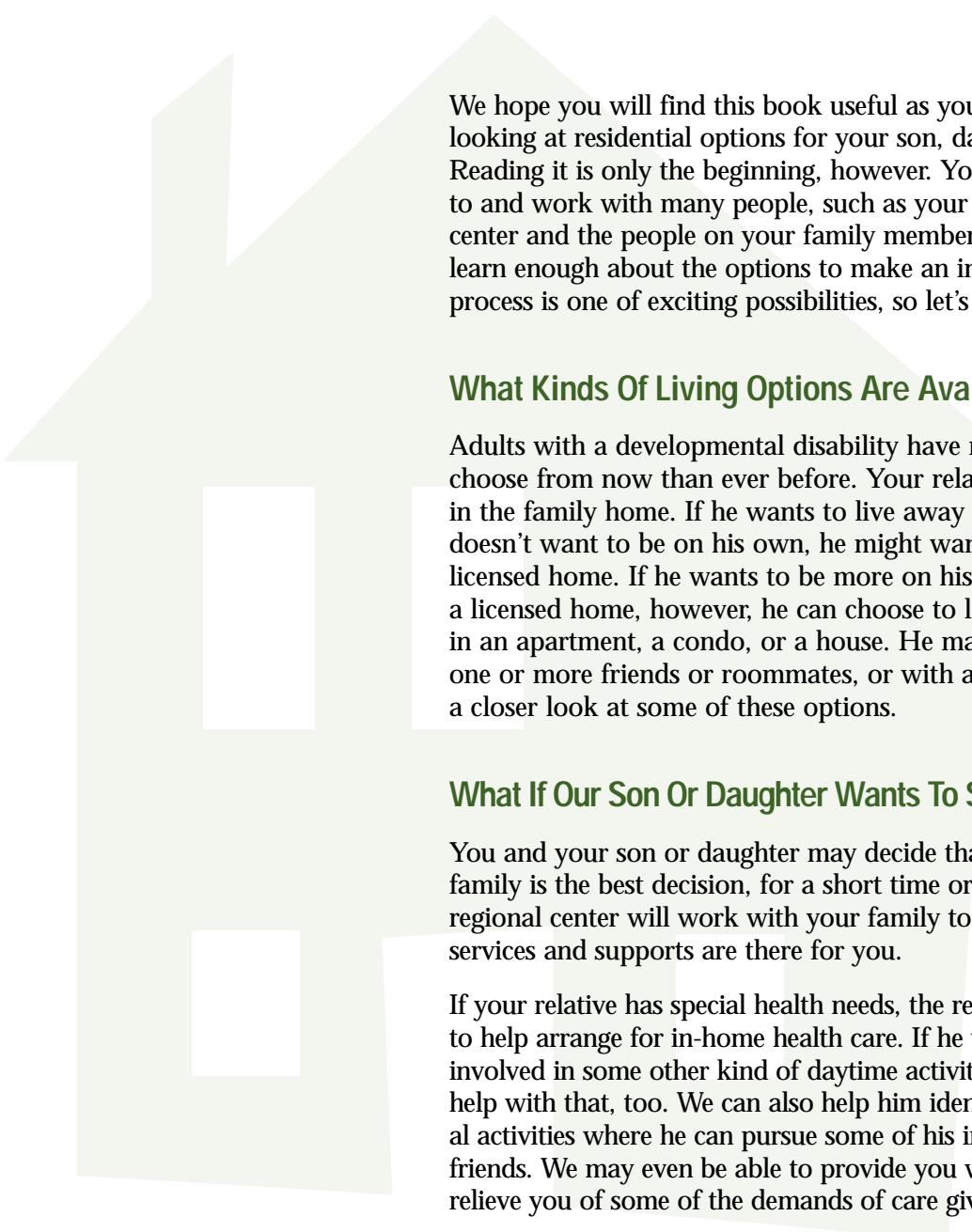
Adults with developmental disabilities live in the residence of their choice – with their families, with friends, or alone. They engage in activities of their choice – work, volunteering, education, or socializing. They have meaningful relationships with friends and co-workers. They are seen as valuable, contributing members of their communities.

As you can see, in our vision adults with developmental disabilities have living options just like all people. Fortunately, just about everyone with a developmental disability has a variety of good living options. The challenge for the person and his family is to evaluate those options to decide which one is right for him at that particular time in his life.

This booklet was written for families of adults with developmental disabilities, to answer the questions that families often ask about living arrangements. In it, we describe the different kinds of options that are out there and discuss how people are supported in different settings.

The booklet also includes a section on rights of people with developmental disabilities. The section covers the basic rights that everyone with a developmental disability has, as well as the additional rights of people living in licensed homes and people living on their own in supported living.





We hope you will find this book useful as you begin the process of looking at residential options for your son, daughter, or other relative. Reading it is only the beginning, however. You will also need to talk to and work with many people, such as your Counselor at the regional center and the people on your family member's planning team, to learn enough about the options to make an informed decision. The process is one of exciting possibilities, so let's begin.

What Kinds Of Living Options Are Available?

Adults with a developmental disability have more living options to choose from now than ever before. Your relative can continue living in the family home. If he wants to live away from the family but doesn't want to be on his own, he might want to try living in a licensed home. If he wants to be more on his own than is possible in a licensed home, however, he can choose to live with some supports in an apartment, a condo, or a house. He may live alone, or with one or more friends or roommates, or with a loved one. Let's take a closer look at some of these options.

What If Our Son Or Daughter Wants To Stay With The Family?

You and your son or daughter may decide that living at home with the family is the best decision, for a short time or a longer time. If so, the regional center will work with your family to make sure the necessary services and supports are there for you.

If your relative has special health needs, the regional center may be able to help arrange for in-home health care. If he wants to find a job or get involved in some other kind of daytime activity, the regional center can help with that, too. We can also help him identify social and recreational activities where he can pursue some of his interests or make new friends. We may even be able to provide you with respite assistance to relieve you of some of the demands of care giving.

Financial Assistance. Adults with developmental disabilities who live at home with their family are generally eligible to receive Supplemental Security Income (SSI) to help pay their living expenses. They are also usually eligible for Medi-Cal to pay their doctor, hospital, and other medical bills. If they have a job and receive a paycheck, they may use this money any way they choose. Depending on their income from their job, however, their SSI may be reduced.

If a person needs some type of special service (e.g., personal care assistance), financial support may be available through the In-Home Supportive Services (IHSS) program. The regional center may provide other services if they are not covered by sources such as private insurance, Medi-Cal, or IHSS.

If you would like more information about SSI or IHSS, ask your Counselor or visit the HRC Resource Center for copies of the “Making It Happen” booklets describing these programs.



What About Living In A Licensed Home?

A licensed home is a place where a group of people with developmental disabilities live together. Usually, between two and six people live in this kind of home. Clients either share a bedroom with one other person, or they have their own bedrooms.

Staff members in licensed homes offer 24-hour care and supervision and make sure clients get meals and take their medication. They provide support when residents need it and help residents learn skills they need to make them more independent. For example, if a client needs help with self-care such as bathing or dressing, the staff will provide that support. If he wants to learn a skill such as cooking or cleaning so he can become more independent, staff will help with that, too.

Staff in all licensed homes make every effort to ensure that the residents participate in the life of the neighborhood and surrounding community as much as possible. They also encourage families to remain fully involved with their sons or daughters living there.

If your family member lives in a licensed home, the staff there have a responsibility to help him do the things he wants to do. It's his home and he should be happy there. For example, he will be involved in things such as:

- decorating his own bedroom
- helping to decide what food will be served at the residence
- doing things he likes to do in the community
- seeing his friends and family when he wants to

All in all, he should have lots of opportunities to make decisions for himself about how he lives his life in his home and in the community.



Homes are licensed either by the California Department of Social Services' Community Care Licensing Division, or the California Department of Health Services. Community Care licensed homes generally provide basic care and supervision, but some are designed especially for people with specific needs. For example, some are set up for people with physical disabilities or medical needs, and some help people with behavior challenges.

If your relative has significant health or medical needs, he could be served in a home licensed by the state Department of Health Services. These homes are treatment-oriented. Residents receive ongoing supervision by a nurse, physician, or other health care professional, according to their individual needs. Residents may also receive services from clinical staff specializing in physical, occupational, or speech therapy.

Financial Assistance. If your adult son or daughter lives in a Community Care Home, he or she will probably be eligible to receive Supplemental

Security Income (SSI) and Medi-Cal. The SSI will go directly to the home to cover the cost of care, although it may not cover the full amount. The regional center receives money from the state to pay for what SSI does not cover. Medical care (doctors, hospitals, medications) is paid for by Medi-Cal.

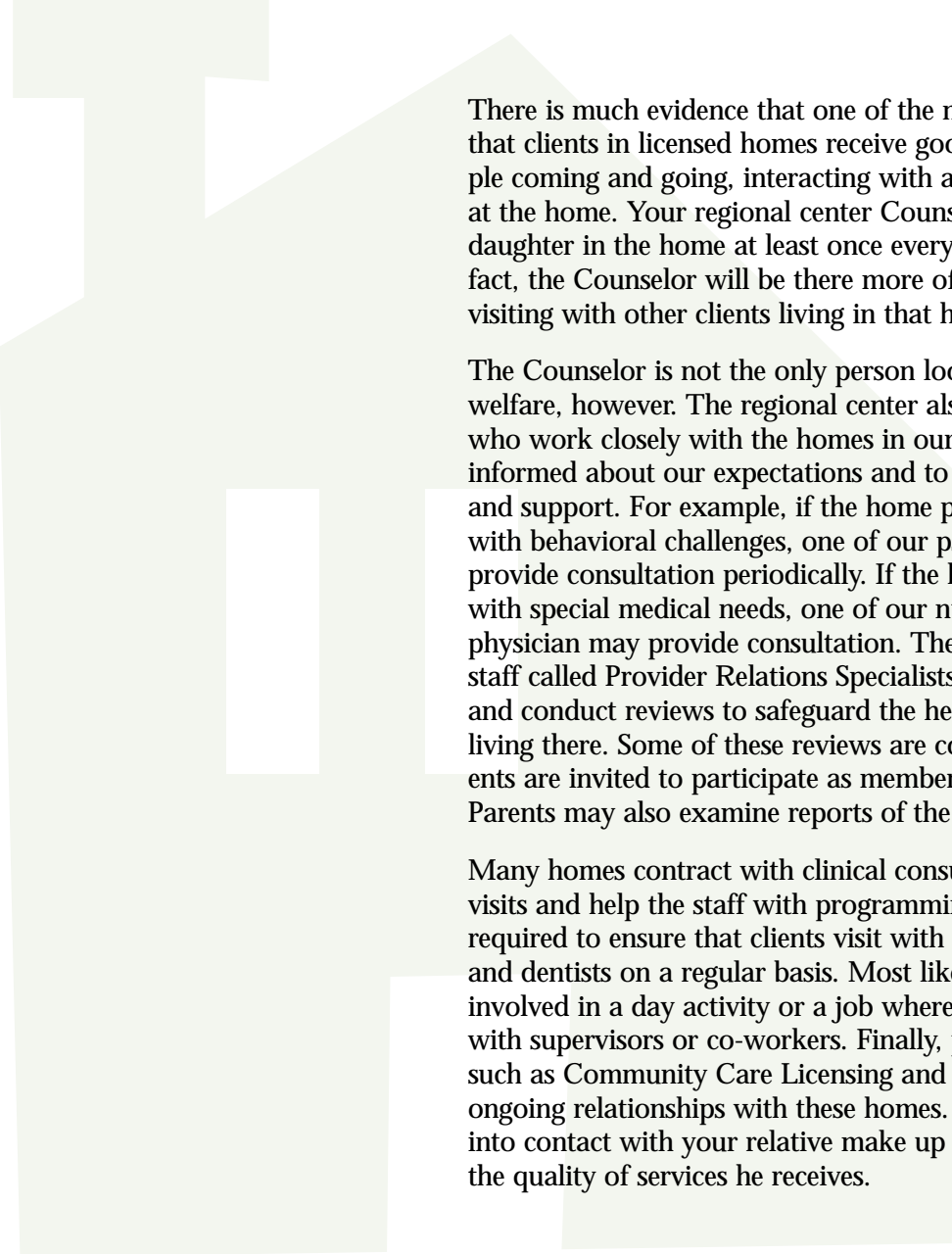
Costs of care in health-licensed homes are usually paid entirely by Medi-Cal. If a client is not eligible for Medi-Cal but has special health-care needs, then it is possible that the regional center would pay some or all of the cost of this type of home.

Personal and Incidental Funds. Residents of licensed homes receive a monthly sum to cover “personal and incidental” (P&I) expenses. P&I funds may be used for clothing, entertainment, or whatever else the person chooses.

How Do We Know Our Relative Will Receive Good Care In A Licensed Home?

Naturally, you wonder about the quality of care that your son or daughter would receive if he or she lives in a licensed home. At Harbor Regional Center, our primary concern is for the health and welfare of our clients. Because of this, we created a special program – called “Expectations and Aspirations for Group Homes” (located at the end of this booklet) – through which licensed home service providers are encouraged and assisted to continually raise the quality of their services above that required by law and regulation.

After consulting with many groups of people, including parents, adult clients, residential service providers, and regional center staff, we created a set of best practice guidelines that identify the kinds of things that people would expect to see in the best homes. We work with service providers to help them achieve the best practices, and we evaluate services on how well they have done. The results of these evaluations are available to families.



There is much evidence that one of the most effective ways to ensure that clients in licensed homes receive good care is to have lots of people coming and going, interacting with and talking to the residents at the home. Your regional center Counselor will visit your son or daughter in the home at least once every three months. Usually, in fact, the Counselor will be there more often, because she will be visiting with other clients living in that home.

The Counselor is not the only person looking out for your relative's welfare, however. The regional center also has a staff of specialists who work closely with the homes in our area to keep them well informed about our expectations and to provide ongoing training and support. For example, if the home provides care for individuals with behavioral challenges, one of our psychologists may visit and provide consultation periodically. If the home provides care for people with special medical needs, one of our nurses, a pharmacist, or our physician may provide consultation. The regional center also employs staff called Provider Relations Specialists who visit homes regularly and conduct reviews to safeguard the health and welfare of the people living there. Some of these reviews are conducted by teams, and parents are invited to participate as members of the review teams. Parents may also examine reports of the reviews.

Many homes contract with clinical consultants who make regular visits and help the staff with programming. Licensed homes are also required to ensure that clients visit with their primary care physicians and dentists on a regular basis. Most likely, your relative will be involved in a day activity or a job where he will interact regularly with supervisors or co-workers. Finally, professionals from agencies such as Community Care Licensing and Health Care Licensing have ongoing relationships with these homes. All these people who come into contact with your relative make up the system that monitors the quality of services he receives.

In addition to all of the people mentioned, you will be encouraged to maintain an active role in your relative's life when he is living away from your home. Your observations are most important and we will count on you to let us know if you see anything that would require us to increase our assistance to the home. In case you have a concern or see something that requires follow-up, we are only a phone call away. Our staff respond promptly to all calls alerting us to potential problems or a need for intervention.

What Is Supported Living?

In supported living, people with disabilities live in their own homes, apartments, or condos in the community. Most of the time they pay rent, but sometimes they may even buy the place where they live. People in supported living may live alone, with a loved one, with a friend, or with a roommate.

The purpose of supported living is to give people with disabilities the help they need to live as independently as possible in the community. Anyone, regardless of his level or type of disability, may live in the community, but almost everyone needs some kind of help to do this successfully. The regional center assists people to find the right help.

A person wanting to live on his own may need help learning to cook, to clean house, or to ride the bus. Most people, however, also need ongoing support. This may include, for example, assistance and support to make sure their bills are paid on time and to maintain their health.

Some of the support that people with developmental disabilities need in order to live on their own may be the kinds of things that friends or family members can do. This kind of support is called "natural support." For example, friends may take a person to church or synagogue. Parents, brothers, or sisters may help them get furniture for





their new place or help them learn to cook. For the things that families or friends cannot do, a supported living service provider helps the person learn how to do these things as independently as possible.

Financial Assistance. It is very important for people who choose supported living to understand that they need to have enough income each month to pay for their rent, utilities, food, and other regular expenses. People living on their own may receive SSI benefits, they may have income from a job, or they may have both. Whatever the source(s) of income, the funds must cover the person's monthly living costs.

The medical care of people in supported living is usually paid for by Medi-Cal or, if they have a job with benefits, by their private medical insurance. People with physical disabilities or other special needs who require someone to come into their home to give personal assistance can receive services through the In-Home Supportive Services (IHSS) program.

HOPE. Harbor Regional Center works very closely with a non-profit corporation that provides special residential opportunities for people who choose supported living. The organization is called Home Ownership for Personal Empowerment, or HOPE. HOPE buys residential properties – single-family homes, duplexes, and condominiums – fixes them up, and rents them at below market rates to clients of Harbor Regional Center. (The rents are usually not more than 30% of the renter's monthly income.) In the year 2002, more than 70 adults with developmental disabilities were living in HOPE properties in Torrance, Long Beach, Lakewood, and Bellflower. A special feature of these homes is that every client has his or her own bedroom. Because the homes are owned by a corporation set up solely for this purpose, HOPE offers greater stability than most other community-based options. If you would like to learn more about this program, ask your regional center Counselor to put you in touch with HRC's housing specialist.

How Do We Choose The Right Living Arrangement?

Choosing a living option for an adult is no different from making any other important life decision. You and your family member need to think about his immediate and longer term life goals, gather information about the options you are considering, and see which option is the best match in view of his preferred future.

As when taking other major steps, it's important to take some time so that you can make the best decisions. Many families begin the process of considering living options a number of times before their son or daughter actually makes a move to a licensed home or supported living. In addition, many service and support programs have waiting lists, so you need to start planning at least a year before your relative expects to make a change in living arrangements. Be sure to give yourself plenty of time.

If you want to investigate community living options for your son or daughter, it is especially important for you to talk to your regional center Counselor. She will probably suggest that you discuss the possibilities at the time of the annual Individual/Family Service Plan meeting. At that time, you may want to include the people who can play specific roles in your family member's life on his planning team to help ensure that his move to the community is successful.

Once you've talked with your Counselor and involved the planning team, you will have a better idea of what kind of living arrangement would work best – based on what your son or daughter wants, likes and needs, and what supports are available. There are as many possibilities as there are people.

If your decision is that a licensed home is the best for your relative, you should try to attend Harbor Regional Center's program called "Rainbow of Choices" to learn even more about options. Your Counselor can assist you in visiting a home or homes that may be appropriate for your relative.

If the decision is to try supported living, the client must choose a supported living service provider. This agency will work with the client and you to determine what supports he needs and how they will be provided. Your HRC Counselor will probably suggest a few service providers with whom you can meet before making a choice. It is a very good idea

for you to meet with them all. The supported living service provider will play a very big role in the life of your son or daughter. For more information on supported living and help in the planning process, see the regional center booklet, "Living On Your Own: A Guide To Supported Living Services."

It's available in the HRC Resource Center.



It is important for families to remember that planning a future is not a once-and-for-all kind of thing. A person's ideas about what he wants will probably change over time. Changes will occur as the person learns more about his hopes, talents, needs, and responsibilities. For example, a person may decide to live in a licensed home now, but decide to try supported living a couple of years from now.

How Do We In The Family Prepare Ourselves For The Move?

All families need to prepare emotionally for a change as significant as a son or daughter moving out of the home. When a son or daughter leaves home, families experience many emotions, including sadness and sometimes guilt. They wonder whether their child will be safe and well cared for, and whether he will still be eager to spend time with family and old friends. Parents who have devoted most of their time and attention to child rearing may, in addition, be at loose ends regarding what they want to do once that part of their work has been completed.

If you experience any of these emotions, you may find it helpful to talk to other regional center families who have dealt or are dealing with a relative leaving home. The best way to do this is to join a support group. For information on support groups, talk to your regional center Counselor or contact HRC's Resource Center.

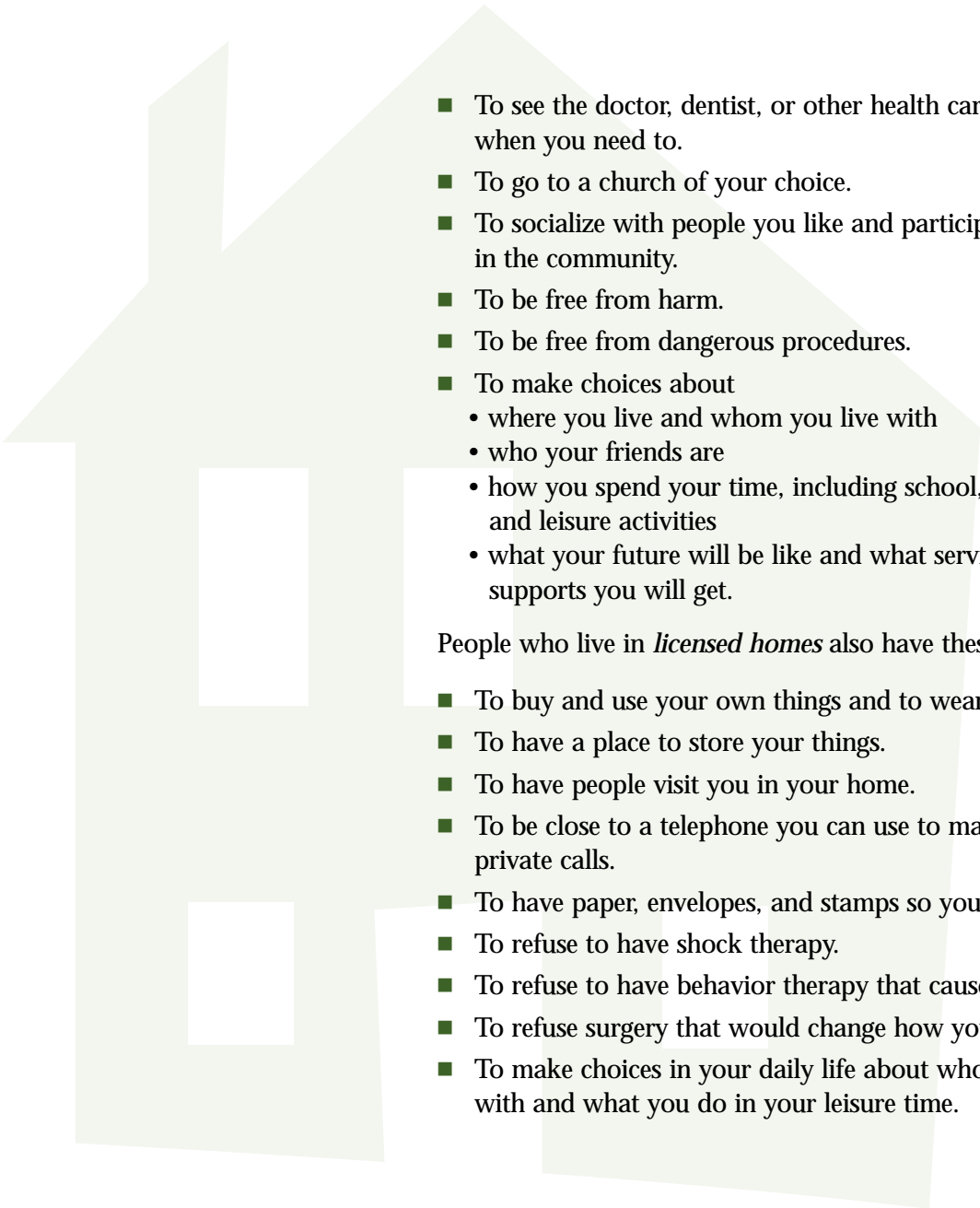
Whatever your family's decision about where your relative will live, it is most important that the decision be *informed*. Informed decisions require time and complete information. You should take enough time to investigate fully what the options are, and the advantages and disadvantages of each of them for your family member at that time in his life. Plan ahead, make many visits to different kinds of living arrangements, talk to service providers, talk to clients who are living in different settings, and talk to their family members. Careful planning will ensure that your family makes the best decision, both for you and for your loved one.

Rights of People with Developmental Disabilities

The law in California says that people with developmental disabilities have rights. Certain rights apply to everyone. Additional rights apply to you if you live in a licensed home or in a supported living setting.

Everyone with a developmental disability has the following rights:

- To receive services and supports that help you become as independent as possible. These services and supports should be provided in the least restrictive setting. This means you make your own rules about how you live as long as your decisions do not put you or someone else in danger, or interfere with the rights of other people.
- To have privacy and to receive help from people who are kind to you and respect you.
- To go to public school until you are 22 years old.

- 
- To see the doctor, dentist, or other health care professional when you need to.
 - To go to a church of your choice.
 - To socialize with people you like and participate in activities in the community.
 - To be free from harm.
 - To be free from dangerous procedures.
 - To make choices about
 - where you live and whom you live with
 - who your friends are
 - how you spend your time, including school, job, and leisure activities
 - what your future will be like and what services and supports you will get.

People who live in *licensed homes* also have these other rights:

- To buy and use your own things and to wear your own clothes.
- To have a place to store your things.
- To have people visit you in your home.
- To be close to a telephone you can use to make and receive private calls.
- To have paper, envelopes, and stamps so you can write letters.
- To refuse to have shock therapy.
- To refuse to have behavior therapy that causes pain or injures you.
- To refuse surgery that would change how your brain functions.
- To make choices in your daily life about whom you spend time with and what you do in your leisure time.

- To tell the regional center how satisfied you are with the services you receive and have this information taken into account when decisions are made.

People who live in *supported living* also have these rights:

- To decide where you live and whom you live with.
- To decide how your home looks, how it's decorated, and how it's arranged.
- To choose who provides your support services.
- To help develop your Individual/Family Service Plan so the services and supports you receive are what you want and what you need.
- To receive services that are right for your changing needs and wishes, without having to leave your home.
- To tell the regional center how satisfied you are with the services you receive and have this information taken into account when decisions are made.
- To end a service without having your decision make you lose other services you are getting from the regional center.
- To receive the information you need to make important life decisions.





Harbor Regional Center Expectations and Aspirations for Group Homes

Serving People with Developmental Disabilities

This document describes Harbor Regional Center's expectations and aspirations for group homes. It reflects what clients, family members, regional center staff, and service providers have told us a good group home should be like. We look forward to working in partnership with our homes in the coming years to help them move their services steadily closer to these expectations and aspirations.

Basic to these guidelines is the principle of client self-determination. This means that people with disabilities make their own reasonable choices about how they live their lives, and these choices are respected by people around them.

A goal of all group homes is to help clients become as independent as possible and achieve the objectives they choose for themselves. Client choice guides services as long as these choices do not pose a threat to the client's health or safety or infringe on the rights of others.

Mission

- The group home's mission statement promotes respect for people with disabilities and participation of people with disabilities in the community.
- Group home staff know the mission statement and can explain how the mission affects what they do with clients.

The Client's Support Network

- The client is helped to develop a reliable network of natural supports, including family, friends, and other people in the community.

- Clients and their families are encouraged to maintain contact with one another.
- A non-conserved adult gives his consent before staff communicate with his family about the client's life.
- Staff develop ways for the family to be involved in the client's life if that is what the client and family both want.
- Staff educate the community about people with developmental disabilities in order to increase community awareness and acceptance.
- Staff involve clients in activities that increase their interactions with people in the community.
- If a client is going through a major change at home, at work, or in the day program, staff work with the regional center Counselor and other people in the client's support system to help the client deal with the change.

Staff-Client Interactions

- Staff use positive approaches in all interactions.
- Staff treat the client with respect.
- Staff know the clients' likes and dislikes, goals and dreams.
- Staff know what outcomes each client is working to achieve in the home.
- A staff person attends the client's annual regional center planning meeting and the annual ISP (for clients attending day activities) or IEP (for clients in school).
- Staff know what medications clients are taking, what the medications are for, and their side effects.
- The client and staff members communicate using the client's preferred language and method of communication.

Training and Support

- Clients receive training and support to help them:
 - stay healthy,
 - stay safe from harm,
 - develop and maintain friendships and other social relationships,
 - make choices about how they live in the home and what they do in the community, and
 - get around in the community (including using public transportation).
- The group home gives clients access to computers.

Asking for Feedback

- Staff ask clients whether they are happy with the services they receive from the group home.
- Staff ask family members and other people important to clients how well they are helping clients.
- The group home makes changes in services as a result of what clients and others tell them.

Client Choice and Self-Determination

- A client's choices are reflected in his everyday life in at least the following ways:
 - individualized schedule and daily activities,
 - bedroom space that is individualized with personal items, pictures, and other decorations,
 - individualized and appropriate hair style, and
 - individualized and appropriate clothing.
- Clients have choices in meal and snack selection.
- Clients receive individualized training and support to help them express their opinions and advocate for themselves.

- The group home provides support for a client council that meets regularly.
- The client council makes decisions or takes actions that affect the lives of the people who live in the group home.

Home Environment

- The home is in a safe neighborhood.
- The home is designed for four or fewer clients.
- Each client has a private room.
- In homes where clients share bedrooms, they are free to change roommates if the new pairings are appropriate and compatible.



Staff Training and Support

- Staff are paid at least 150% of minimum wage.
- Staff receive medical and leave benefits.
- Staff members are paid for a minimum of 2 hours per month to participate in training.
- Staff receive initial training that includes:
 - basic methods of interaction and communication with clients,
 - the principle of dignity of risk,
 - assistive technology and how clients may benefit from the use of appropriate adaptive devices,
 - how to recognize signs of pain, other discomfort, or illness in residents.
- Staff are encouraged to attend outside training conducted by the regional center or other organizations.
- Staff are given access to computers.
- The group home management has instituted specific actions in an attempt to keep staff turnover low.



HARBOR DEVELOPMENTAL DISABILITIES FOUNDATION, INC.
21231 Hawthorne Boulevard, Torrance, CA 90503
(310) 540-1711 (888) 540-1711
www.HarborRC.org



Las
OPCIONES
son importantes

**Alternativas de vivienda para el
adulto con incapacidad de desarrollo**

En el Harbor Regional Center, tenemos una visión para el futuro.

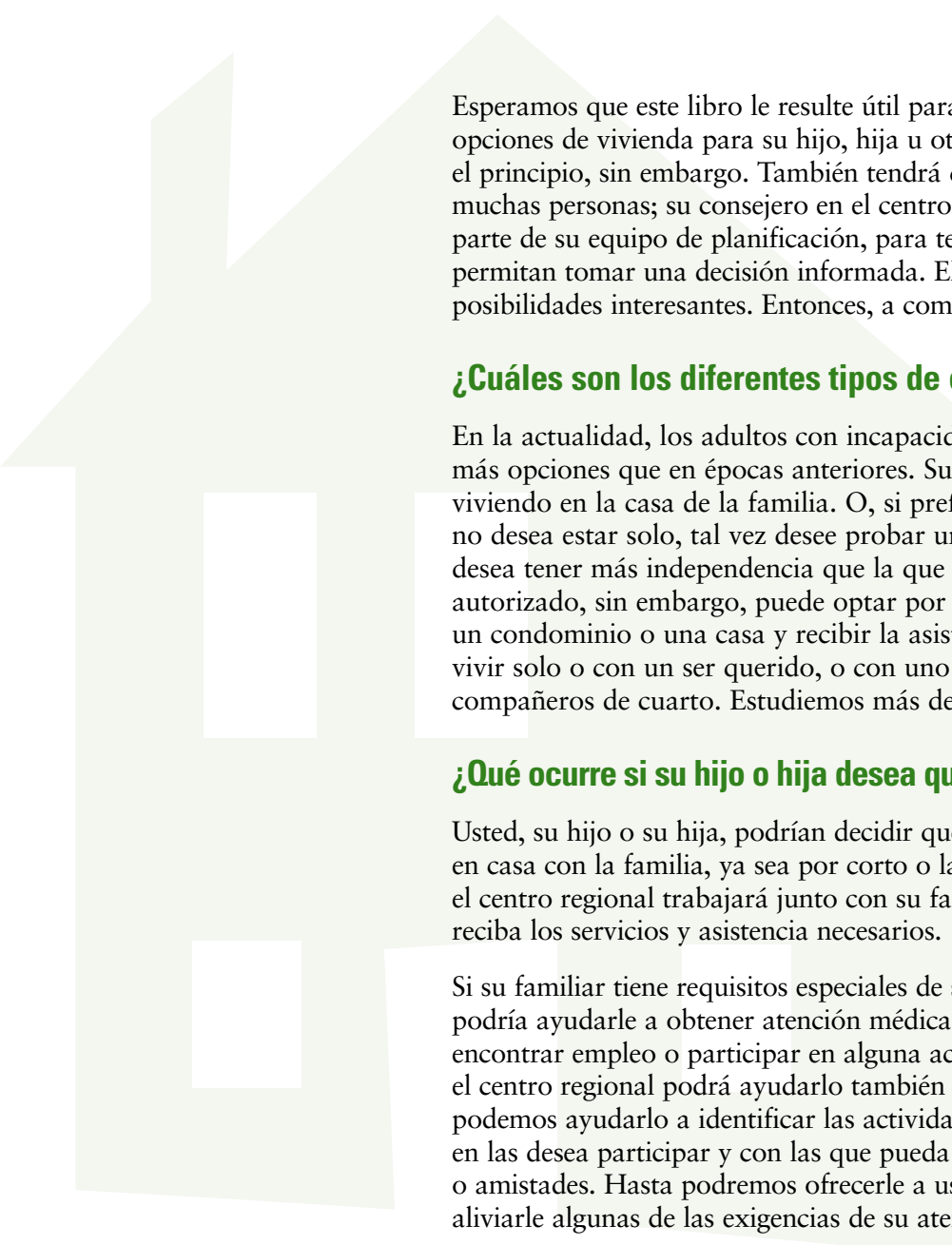
El adulto con incapacidad de desarrollo vive en la residencia que el elija – con su familia, sus amigos o sólo. Realiza actividades de su elección – empleo – trabajo voluntario, educación o socialización. Sus relaciones con sus compañeros de trabajo o sus amigos son significativas. Se lo considera un miembro valioso y contribuyente en la comunidad.

Como se puede apreciar, en nuestra visión el adulto con incapacidad de desarrollo tiene opciones en su vida, igual que todos los demás. Afortunadamente, casi toda persona con incapacidad de desarrollo cuenta con una variedad de alternativas de vivienda adecuadas. Evaluarlas y decidir cuál es la adecuada en cierto momento de su vida es la prueba que se le presenta a él y a su familia.

Este folleto fue preparado para las familias del adulto con incapacidad de desarrollo; para contestar a sus preguntas sobre los diferentes tipos de vivienda. Hablamos de las diversas opciones y de la asistencia que reciben en diferentes marcos.

El folleto incluye también una sección sobre los derechos de las personas con incapacidad de desarrollo. Trata sobre los derechos básicos de todos estos individuos y los derechos adicionales de personas que viven en hogares autorizados y por su cuenta recibiendo servicios de apoyo residencial.





Esperamos que este libro le resulte útil para comenzar a investigar las opciones de vivienda para su hijo, hija u otro familiar. Leerlo es sólo el principio, sin embargo. También tendrá que hablar y trabajar con muchas personas; su consejero en el centro regional y quienes forman parte de su equipo de planificación, para tener los detalles que le permitan tomar una decisión informada. El proceso está repleto de posibilidades interesantes. Entonces, a comenzar.

¿Cuáles son los diferentes tipos de opciones de vivienda?

En la actualidad, los adultos con incapacidad de desarrollo tienen más opciones que en épocas anteriores. Su familiar puede continuar viviendo en la casa de la familia. O, si prefiere no hacerlo, pero no desea estar solo, tal vez desee probar un hogar autorizado. Si desea tener más independencia que la que le permitiría un hogar autorizado, sin embargo, puede optar por vivir en un apartamento, un condominio o una casa y recibir la asistencia que desee. Puede vivir solo o con un ser querido, o con uno o varios amigos o compañeros de cuarto. Estudiemos más de cerca estas opciones.

¿Qué ocurre si su hijo o hija desea quedarse con la familia?

Usted, su hijo o su hija, podrían decidir que la mejor decisión es vivir en casa con la familia, ya sea por corto o largo tiempo. Si así fuera, el centro regional trabajará junto con su familia para asegurarse que reciba los servicios y asistencia necesarios.

Si su familiar tiene requisitos especiales de salud, el centro regional podría ayudarle a obtener atención médica residencial. Si él desea encontrar empleo o participar en alguna actividad durante el día, el centro regional podrá ayudarlo también en ese aspecto. También podemos ayudarlo a identificar las actividades sociales y recreativas en las desea participar y con las que pueda formar nuevos intereses o amistades. Hasta podremos ofrecerle a usted cuidado suplente para aliviarle algunas de las exigencias de su atención.

Asistencia financiera. Los adultos con incapacidad de desarrollo que viven en casa con su familia, por lo general cumplen los requisitos para recibir Ingresos de Seguridad Suplementaria (SSI, por sus siglas en inglés) como asistencia por gastos de vivienda. Generalmente, también cumplen los requisitos para recibir Medi-Cal por gastos médicos, de hospital y otros. Si trabajan y reciben sueldo, pueden utilizar su dinero de la forma que ellos creen conveniente. Aunque, dependiendo de la cantidad de sus ingresos, los beneficios de SSI.

Si la persona necesita algún servicio especial (como asistencia para su cuidado personal), asistencia financiera puede estar disponible a través de un programa de Servicio de Apoyo Residencial (IHSS, por sus siglas en inglés). El centro regional puede ofrecer ciertos servicios mientras que dichos servicios no estén cubiertos por otras fuentes como seguros privados, Medi-Cal o IHSS.

Si desea más información sobre SSI o IHSS, consulte con su consejero o visite el Centro de Recursos de HRC para obtener una copia del folleto titulado “Se puede lograr” que describe estos programas.



Y si deseo vivir en un hogar autorizado?

Un hogar autorizado es donde un grupo de personas con incapacidad de desarrollo viven juntas. Generalmente, en este tipo de residencia viven de dos a seis personas. Los clientes comparten un dormitorio con otra persona, o tienen su dormitorio propio.

Los miembros del personal de un hogar autorizado ofrecen cuidado y supervisión 24 horas al día y se aseguran que el cliente tenga alimentos y tome sus medicamentos. Ellos proporcionan apoyo cuando sea necesario y ayudan a los clientes a adquirir los conocimientos necesarios para ser más independientes. Por ejemplo, si un cliente necesita ayuda en su

cuidado personal, para bañarse o vestirse, el personal la proporciona. Si desea aprender a cocinar o a limpiar para poder ser más independiente, el personal también lo ayudará con el entrenamiento necesario.

El personal de todos los hogares autorizados procura que los residentes participen en el mayor grado posible en la vida del vecindario y de la comunidad que los rodea. También alientan a las familias para participar de lleno en la vida de sus hijos que residen en el hogar.

Si su familiar vive en un hogar autorizado, el personal tiene la responsabilidad de ayudarlo a hacer todo lo que desee. Es el hogar de él y el debe estar feliz. Por ejemplo, participará en:

- La decoración de su propio dormitorio
- La decisión sobre lo que se servirá en las comidas de la residencia
- Las actividades que le gustan en la comunidad
- Reuniones con sus amigos y familiares cuando lo desee



Así es que el cliente tendrá muchas oportunidades de tomar decisiones por sí mismo acerca de su vida en su hogar y en la comunidad.

Las residencias son autorizadas por la División de Permisos para el Cuidado Comunitario del Departamento de Servicios Sociales de California o por el Departamento de Servicios de la Salud de California. Las residencias con permisos del Cuidado Comunitario generalmente proporcionan atención básica y supervisión, aunque algunas están diseñadas especialmente para personas con requisitos específicos. Por ejemplo, se dedican a atender personas incapacitadas físicamente o con requisitos médicos y ayudan a personas con problemas de conducta.

Si los problemas de salud de su familiar son serios, puede recibir atención en una residencia autorizada por el Departamento de Servicios de la Salud del estado ya que su enfoque principal es el

tratamiento. Los residentes reciben la supervisión continua de una enfermera, un médico u otro profesional de atención médica, de acuerdo a sus necesidades individuales. Los residentes también podrían recibir servicios del personal clínico especializado en terapia física, ocupacional o logoterapia.

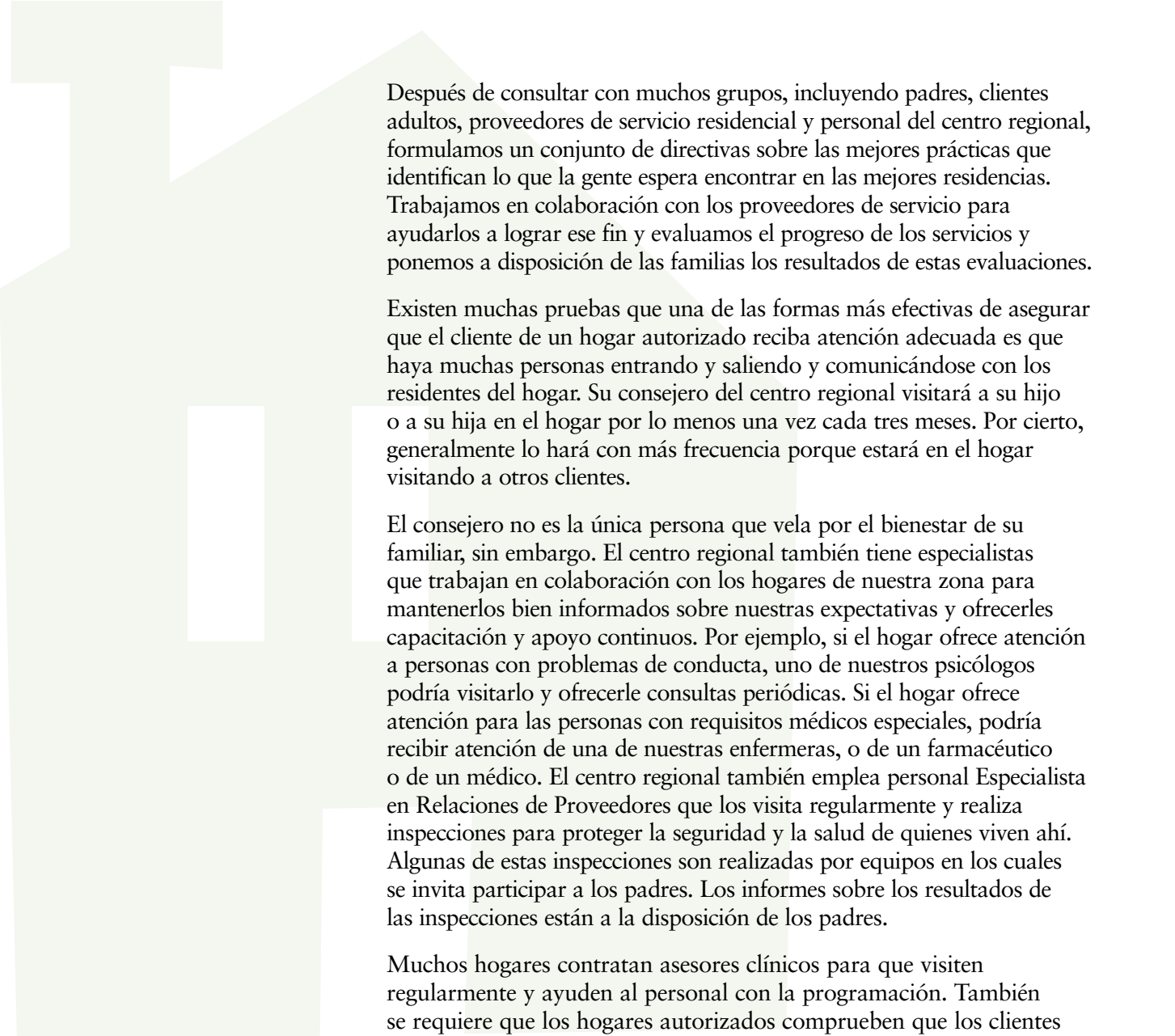
Asistencia financiera. Si su hija o hijo adulto vive en una residencia de Cuidado Comunitario probablemente cumple los requisitos para recibir Ingresos de Seguridad Suplementaria (SSI) y Medi-Cal. Los beneficios de SSI serán enviados directamente al hogar para cubrir los costos de la atención, aunque es posible que no cubra su totalidad. El centro regional recibe fondos del estado para pagar lo que no está cubierto por SSI. La atención médica (doctores, hospitales y medicamentos) los paga Medi-Cal.

En las residencias autorizadas por del Departamento de Servicios de Salud, el Medi-Cal paga por todos los gastos. Si el cliente no cumple los requisitos de Medi-Cal pero tiene necesidades médicas especiales, es posible que el centro regional pague parte o todo el costo de este tipo de residencia.

Fondos por gastos personales e incidentales. Los residentes de hogares autorizados reciben una suma mensual para cubrir gastos personales e incidentales (P&I). Estos fondos se pueden utilizar para comprar ropa, entretenimiento o lo que la persona desee.

¿Cómo comprobamos que nuestro familiar recibirá atención adecuada en un hogar autorizado?

Naturalmente, usted posiblemente quiera saber sobre la calidad de atención que recibirá su hijo o su hija si vive en un hogar autorizado. En Harbor Regional Center nuestra preocupación principal es la salud y el bienestar de nuestros clientes. Es por eso que creamos guías directivas para servicios residenciales, a través del cual los proveedores reciben estímulo y asistencia para elevar continuamente la calidad del servicio que ofrecen por encima de los requisitos legales o normativos.



Después de consultar con muchos grupos, incluyendo padres, clientes adultos, proveedores de servicio residencial y personal del centro regional, formulamos un conjunto de directivas sobre las mejores prácticas que identifican lo que la gente espera encontrar en las mejores residencias. Trabajamos en colaboración con los proveedores de servicio para ayudarlos a lograr ese fin y evaluamos el progreso de los servicios y ponemos a disposición de las familias los resultados de estas evaluaciones.

Existen muchas pruebas que una de las formas más efectivas de asegurar que el cliente de un hogar autorizado reciba atención adecuada es que haya muchas personas entrando y saliendo y comunicándose con los residentes del hogar. Su consejero del centro regional visitará a su hijo o a su hija en el hogar por lo menos una vez cada tres meses. Por cierto, generalmente lo hará con más frecuencia porque estará en el hogar visitando a otros clientes.

El consejero no es la única persona que vela por el bienestar de su familiar, sin embargo. El centro regional también tiene especialistas que trabajan en colaboración con los hogares de nuestra zona para mantenerlos bien informados sobre nuestras expectativas y ofrecerles capacitación y apoyo continuos. Por ejemplo, si el hogar ofrece atención a personas con problemas de conducta, uno de nuestros psicólogos podría visitarlo y ofrecerle consultas periódicas. Si el hogar ofrece atención para las personas con requisitos médicos especiales, podría recibir atención de una de nuestras enfermeras, o de un farmacéutico o de un médico. El centro regional también emplea personal Especialista en Relaciones de Proveedores que los visita regularmente y realiza inspecciones para proteger la seguridad y la salud de quienes viven ahí. Algunas de estas inspecciones son realizadas por equipos en los cuales se invita participar a los padres. Los informes sobre los resultados de las inspecciones están a la disposición de los padres.

Muchos hogares contratan asesores clínicos para que visiten regularmente y ayuden al personal con la programación. También se requiere que los hogares autorizados comprueben que los clientes visitan a su médico de atención primaria y a su dentista regularmente.

Posiblemente su familiar participará en una actividad diaria o tendrá un empleo en el que habrá un proceso de interacción con sus supervisores y compañeros de trabajo. Finalmente, profesionales de organismos tales como Community Care Licensing y Health Care Licensing mantienen una relación constante con estos hogares. Todas estas personas que tienen contacto con su familiar forman parte del sistema que vigila la calidad del servicio que él recibe.

Además de las personas mencionadas, se le recomienda mantener un papel activo en la vida de su familiar cuando ya no viva en su casa. Las observaciones tuyas son muy importantes y contamos con usted para que nos informe si observa algo que requiere aumentar nuestra asistencia para el hogar. Si usted tiene alguna inquietud o si observa algo que requiere atención, sólo tiene que llamarnos. Nuestro personal responde rápidamente a todas las llamadas que nos alertan de problemas en potencia o que requieren nuestra intervención.

¿Qué es el apoyo residencial?

Con el apoyo residencial, la persona incapacitada vive en su propia casa, apartamento o condominio dentro de la comunidad. La mayoría paga alquiler, pero a veces hasta pueden comprar su residencia. Las personas que participan del apoyo residencial pueden vivir solos, con un ser querido, con un amigo o con un compañero de cuarto.

El propósito del apoyo residencial es facilitarle a la persona incapacitada la ayuda que necesita para vivir tan independientemente dentro de la comunidad como le sea posible. Todos, sin importar su nivel o tipo de incapacidad, pueden vivir dentro de la comunidad, pero casi todos necesitan ayuda para tener éxito. El centro regional los asiste en encontrar la ayuda adecuada.

Una persona que desee vivir por su cuenta podría necesitar ayuda para aprender a cocinar, a limpiar la casa o tomar el autobús. Para la





mayoría, sin embargo, será necesario un apoyo continuo que puede incluir, por ejemplo, asistencia y servicios que comprueben que están pagando las cuentas puntualmente y que se mantienen sanos.

Parte del apoyo que necesita la persona con incapacidades del desarrollo para vivir por su cuenta se lo pueden ofrecer sus amistades o familiares. Este es el llamado “apoyo natural.” Por ejemplo, sus amigos lo pueden llevar a la iglesia o a la sinagoga. Los padres o hermanos pueden ayudarlo a conseguir muebles para su nuevo hogar o a aprender a cocinar. Cuando sus familiares o amigos no puedan, el proveedor de servicios de apoyo residencial lo ayudará a aprender lo necesario para ser lo más independiente posible.

Asistencia financiera. Es muy importante que las personas que optan por el apoyo residencial comprendan que necesitan tener ingresos mensuales suficientes para pagar el alquiler, los servicios públicos, los alimentos y otros gastos regulares. Las personas que viven solas pueden recibir beneficios de SSI, el sueldo de su empleo, o ambos. Cualquiera que sea la fuente o las fuentes de sus ingresos, los fondos deberán cubrir los gastos de vivienda mensuales.

La atención médica de quienes participan en el apoyo residencial la paga generalmente MediCal o, si reciben prestaciones en su empleo, el seguro médico privado. Las personas incapacitadas físicamente o, que a raíz de otros requisitos especiales deben ser visitados en su hogar para recibir asistencia personal, pueden recibir servicios a través del programa de Servicios de Apoyo Residencial (IHSS, por sus siglas en inglés).

HOPE. Harbor Regional Center trabaja muy de cerca con Home Ownership for Personal Empowerment, HOPE, empresa sin fines de lucro que ofrece oportunidades residenciales especiales para quienes optan por el apoyo residencial. Compra propiedades residenciales; viviendas unifamiliares, dobles y condominios, los arregla y los alquila por debajo del precio de mercado a los clientes de Harbor Regional Center. (El

alquiler generalmente no es más del 30 por ciento del ingreso anual del inquilino.) Durante el año 2001, 71 adultos con incapacidades del desarrollo vivían en propiedades HOPE en Torrance, Long Beach, Lakewood y Bellflower. Una característica especial de estas viviendas es que cada cliente tiene su propio dormitorio. Como son propiedad de una entidad formada únicamente para ese propósito, HOPE ofrece más estabilidad que otras opciones en la comunidad. Si desea obtener mayor información sobre este programa, solicite que su consejero del centro regional lo ponga en contacto con el especialista de vivienda de HRC.

¿Cómo elegimos la opción de vivienda más apropiada?

La selección de vivienda para un adulto es como cualquier otra decisión importante en la vida. Usted y su familiar deben considerar las metas próximas y de largo plazo de su vida, reunir información sobre las opciones que están considerando y decidir cuál de ellas coincide mejor con los planes que tiene para el futuro.

Como en otros pasos importantes, es fundamental que las decisiones se tomen con tiempo. Muchas familias comienzan el proceso de comparar opciones de vivienda pocas veces antes de que el hijo o la hija realice la transición a un hogar autorizado o al apoyo residencial. Además, muchos programas de servicio y asistencia tienen listas de espera, por lo que debe comenzar a hacer planes por lo menos un año antes de la fecha en que su pariente espera realizar el cambio de vivienda. Asegúrese que tiene suficiente tiempo.

Si desea investigar las opciones de vivienda dentro de la comunidad para su hijo o hija, es muy importante que hable con su consejero del centro regional quien posiblemente le sugiera que discuta las posibilidades durante la reunión anual de Plan de Servicio Individual/Familiar. En ese momento podrá incluir en el equipo de planificación de su familiar a las personas que pueden desempeñar papeles específicos en su vida para ayudarlo a garantizar que su traslado a la comunidad se realice con éxito.

Cuando haya hablado con su consejero y formado el equipo de planificación, tendrá una idea más precisa sobre el tipo de vivienda que más le conviene en relación con lo que su hijo o hija desea, le gusta y necesita y la asistencia que tiene disponible. Las posibilidades son tan variadas como la gente.



Si decide que lo más apropiado para su familiar es un hogar autorizado, trate de asistir al programa de Harbor Regional Center llamado “Rainbow of Choices” para obtener mayor información sobre las opciones. Su consejero puede ayudarlo a visitar un hogar o varios que sean apropiados para su familiar.

Si decide probar el apoyo residencial, el cliente debe seleccionar un proveedor de servicio de apoyo residencial. La agencia, junto con usted y el cliente, determinarán qué asistencia necesita y cómo se le proporcionará. Su consejero de HRC probablemente sugiera algunos proveedores con los que puede reunirse antes de tomar una decisión y será muy buena idea que se reúna con todos. El proveedor de apoyo residencial desempeñará un papel muy importante en la vida de su hijo o hija.

Para obtener mayor información sobre el apoyo residencial y asistencia con el proceso de planificación, consulte el folleto del centro regional titulado “Información importante sobre los servicios de apoyo residencial” que se encuentra en el Centro de Recursos de HRC.

Es importante que las familias recuerden que la planificación del futuro no es algo que “se hace una vez y para siempre.” Con el tiempo, las ideas que la persona tiene sobre sus preferencias posiblemente cambiarán. Los cambios ocurren a medida que la persona conoce mejor sus esperanzas, talentos, necesidades y responsabilidades. Por ejemplo, alguien puede decidir vivir por ahora en un hogar autorizado y en un par de años probar el apoyo residencial.

¿Cómo debemos prepararnos los miembros de la familia para el cambio?

Todas las familias tienen que prepararse emocionalmente para un cambio tan importante como el de la mudanza de su hijo o hija del hogar familiar. Cuando un hijo se va de la casa, la familia siente muchas emociones, incluyendo tristeza y, a veces, sentimientos de culpa. Se preguntan si su hijo no correrá peligro y si estará bien cuidado y también si querrá pasar tiempo con sus familiares y amigos. Los padres que han dedicado la mayoría de su tiempo a criar a sus hijos pueden, además, sentirse desorientados sobre lo que desean hacer una vez que esa parte de su labor esté terminada.

Si usted siente estas emociones, le podría resultar útil hablar con otras familias del centro regional que ya han pasado, o que están viviendo, esta situación. Para eso, lo mejor es participar en un grupo de apoyo. Para obtener información sobre grupos de apoyo, hable con su consejero del centro regional o comuníquese con el Centro de Recursos de HRC.

No importa qué decisión tome su familia sobre la residencia de su familiar, lo más importante es que sea una decisión informada. Para eso se requiere tiempo e información completa. Tendrá que investigar con tiempo y totalmente todas las opciones y también sus ventajas y desventajas de cada una según el momento por el que pasa la vida de su familiar. Haga los planes con tiempo, visite muchas veces los diferentes tipos de vivienda, hable con los proveedores de servicio y con los clientes que viven en diferentes situaciones y también con los familiares de ellos. Si planifica metódicamente, podrá estar seguro que su familia tome la mejor decisión, tanto para usted como para su ser querido.

Derechos de las personas con incapacidades del desarrollo

La ley de California decreta que las personas con incapacidades del desarrollo tienen derechos; algunos aplican a todos y otros derechos

adicionales aplican si usted vive en un hogar autorizado o con apoyo residencial:

Toda persona con incapacidades del desarrollo tiene el derecho de:

- Recibir servicios y asistencia que lo ayude a ser tan independiente como sea posible y que serán suministrados en el ámbito menos restrictivo. Lo anterior significa que es usted quién decide cómo ha de vivir siempre que no se ponga en peligro a sí mismo ni a otros, ni interfiera con los derechos de otras personas.
- Disfrutar de intimidad y recibir ayuda de las personas que le brinden respeto y amabilidad.
- Asistir a la escuela pública hasta cumplir los 22 años de edad.
- Consultar con un médico, dentista u otro profesional de atención de la salud cuando lo necesite.
- Ir a la iglesia de su elección.
- Hacer vida social con las personas que sean de su agrado y a participar en las actividades de la comunidad.
- No correr peligro.
- No recibir procedimientos peligrosos.
- Decidir:
 - dónde y con quién vivir
 - quiénes son sus amistades
 - cómo pasa el tiempo, incluyendo la escuela, empleo y actividades de ocio
 - cómo será su futuro y qué servicios y asistencia recibirá.

Las personas que viven en hogares autorizados también tienen los siguientes derechos:

- Comprar y utilizar sus artículos propios y vestirse con su propia ropa.
- Tener un lugar donde guardar su propiedad.
- Tener visitas en su casa.
- Tener acceso a un teléfono para hacer y recibir llamadas privadas.

- Tener papel, sobres y estampillas para escribir cartas.
- Rechazar la terapia de choque.
- Rechazar la terapia de conducta que causa dolor o lesiones.
- Rechazar la cirugía para cambiar las funciones cerebrales.
- Tomar decisiones en su vida diaria sobre con quién estar y cómo pasar el tiempo de ocio.
- Informar al centro regional si está o no satisfecho con los servicios que recibe y que se tome en cuenta esta información al tomarse decisiones.

La persona que vive con apoyo residencial también tiene los siguientes derechos:

- Decidir cómo y con quién ha de vivir.
- Decidir cómo acomodar, arreglar y decorar su hogar.
- Elegir quién le proporciona servicios de apoyo.
- Ayudar en la preparación de su Plan de Servicio Individual/Familiar para que los servicios y la atención que reciben sean los que desea y necesita.
- Recibir servicios apropiados para usted a medida que cambian sus requisitos y deseos sin tener que dejar su hogar.
- Informar al centro regional si está o no satisfecho con los servicios que recibe y que se tome en cuenta esta información al tomarse decisiones.
- Cancelar el servicio sin que esta decisión resulte en la pérdida de otros servicios que recibe en el centro regional.
- Recibir la información que necesita para tomar las decisiones importantes de su vida.





HARBOR DEVELOPMENTAL DISABILITIES FOUNDATION, INC.
21231 Hawthorne Boulevard, Torrance, CA 90503
(310) 540-1711 (888) 540-1711
www.HarborRC.org

LOS ANGELES COUNTY RENTERS IN CRISIS: A CALL FOR ACTION

KEY FINDINGS

- » Cuts in federal and state funding, including elimination of State Redevelopment, have reduced investment in affordable housing production and preservation in Los Angeles County by nearly \$457 million annually since 2008, a 64% reduction.
- » Median rent in Los Angeles County has increased 32% since 2000 while median renter household income has decreased 3%, when adjusted for inflation.
- » Renters need to earn 4 times local minimum wage to afford the median asking rent of \$2,499 in Los Angeles County.
- » Los Angeles County's lowest-income renters spend 70% of income on rent, leaving little left for food, transportation, health expenses, and other needs.
- » When housing costs are considered, Los Angeles County's poverty rate rises from 18.3% to 25.6%.
- » Los Angeles County needs 551,807 more affordable rental homes to meet the needs of its lowest-income renters.

LOS ANGELES COUNTY'S POVERTY RATE RISES TO 25.6% WHEN HIGH HOUSING COSTS ARE INCLUDED

Official Poverty Measure (OPM)
18.3%

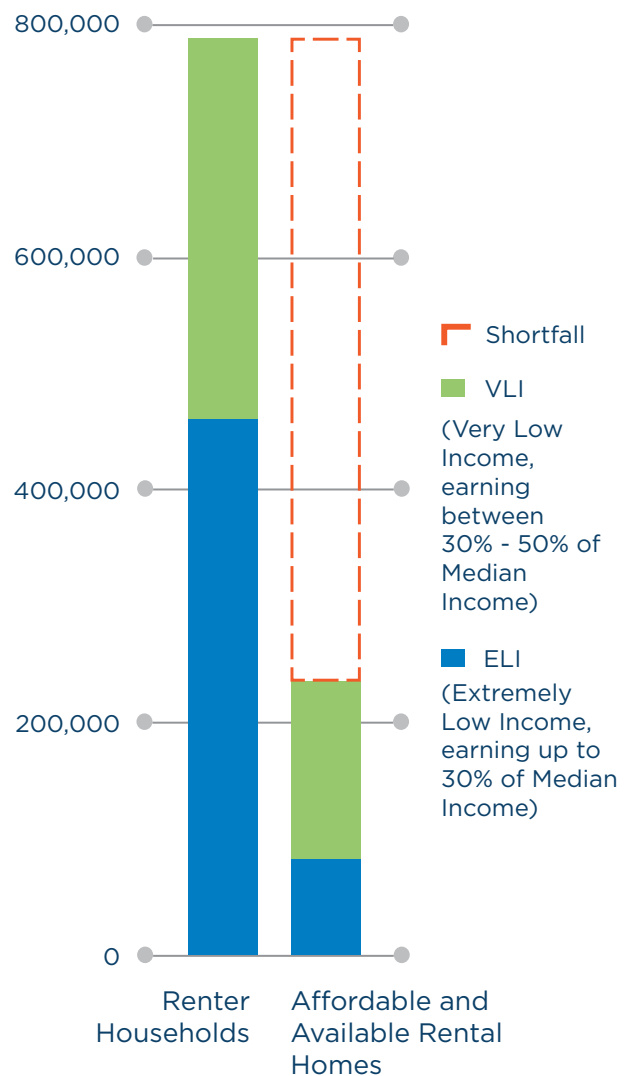
Unadjusted for Housing Costs

California Poverty Measure (CPM)
25.6%

Adjusted for Housing Costs and Social Benefits

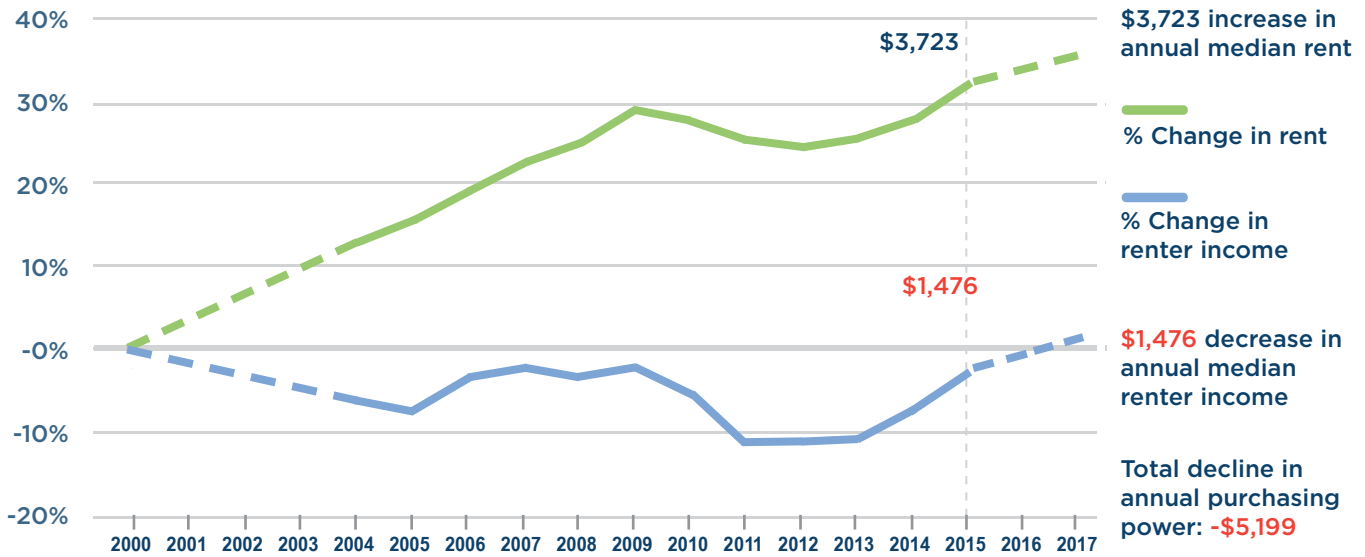
Source: Public Policy Institute of California. California Poverty by County, 2012-2014.

LOS ANGELES COUNTY NEEDS 551,807 MORE AFFORDABLE RENTAL HOMES



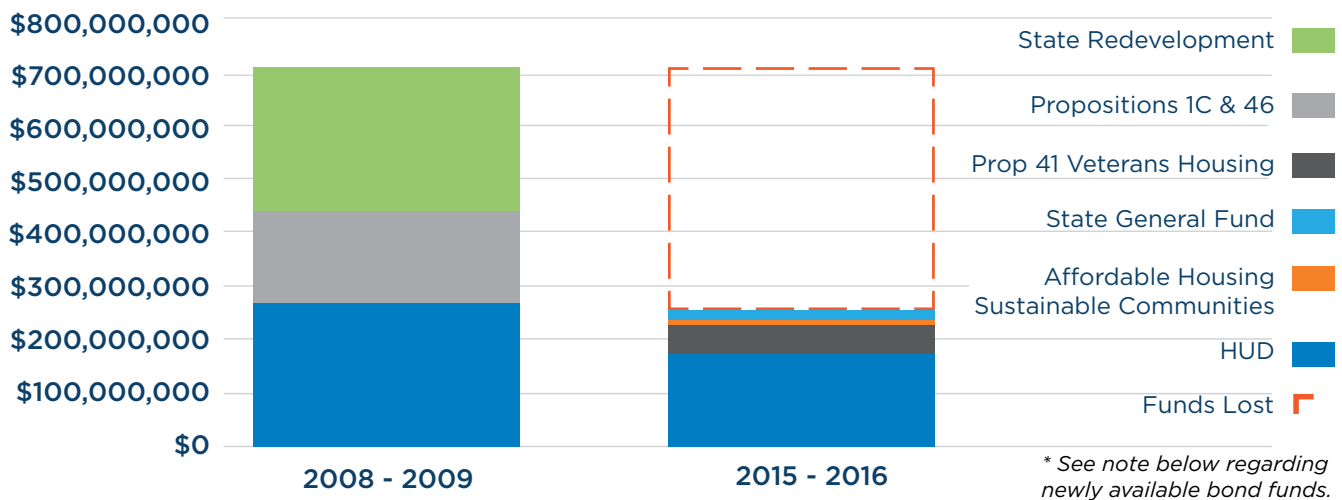
Source: CHPC analysis of 2015 PUMS data using adapted NLIHC methodology.

LOS ANGELES COUNTY'S INFLATION-ADJUSTED MEDIAN RENT INCREASED 32% WHILE MEDIAN RENTER INCOME DECREASED 3% FROM 2000 TO 2015



SOURCE: CHPC analysis of 2000 - 2015 Census and ACS data. Median renter income and rent from 2001-2004 and 2016 and 2017 are estimated trends. Median rent and median renter income are inflation adjusted to 2015 dollars.

LOS ANGELES COUNTY LOST 64% OF STATE AND FEDERAL FUNDING FOR HOUSING PRODUCTION AND PRESERVATION FROM FY 2008-09 TO FY 2015-16

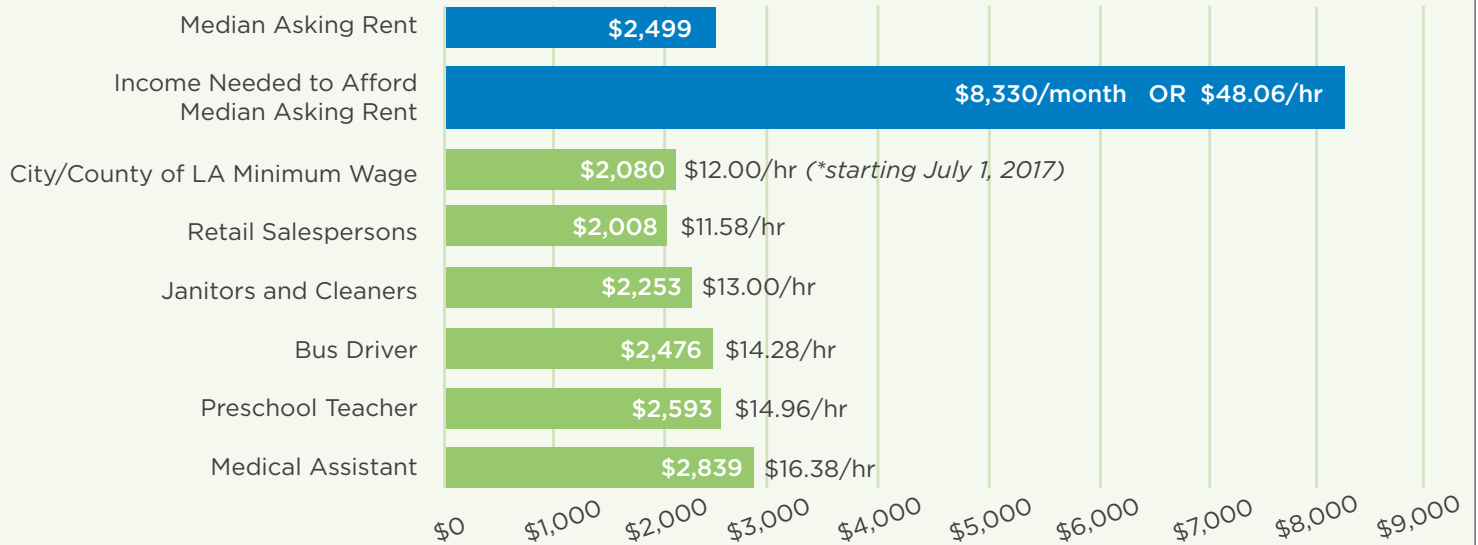


FUNDING SOURCE	FY 2008-2009	FY 2015-2016	% CHANGE
State Redevelopment	\$274,787,841	\$0	-100%
State Housing Bonds and Housing Programs	\$176,595,573	\$85,478,030	-52%
U.S. Dept. of Housing & Urban Development	\$260,516,144	\$169,556,041	-35%
Total	\$711,899,558	\$255,034,071	-64%

*In November 2016, voters in the City of Los Angeles passed a bond initiative (Proposition HHH) that will provide \$1.2 billion for the development of 10,000 units of Permanent Supportive Housing over the next decade. In March, Los Angeles County passed a 1/4 cent sales tax (Measure H) to bring \$355 million annually for services targeted at people experiencing homelessness. Some Measure H funds may be used to develop affordable housing with services.

Source: CHPC analysis of 2008-2009 annual HCD Redevelopment Housing Activities report; 2008-2009 and 2015-2016 annual HCD Financial Assistance Programs Reports; HUD CPD Appropriations Budget data for fiscal years 2009 and 2016.

LOS ANGELES COUNTY RENTERS NEED TO EARN \$8,330 A MONTH TO AFFORD MEDIAN ASKING RENTS



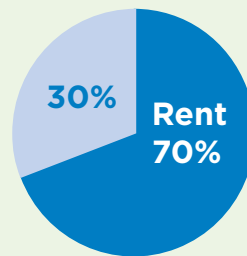
Source: Paul Waddell, Urban Analytics Lab, University of California, Berkeley, retrieved from analysis of online Craigslist listings on April 27, 2017. CHPC analysis of Bureau of Labor Statistics Median Annual Wage Data for CA Occupations in 2016.

WHAT DO RENTERS IN LOS ANGELES COUNTY HAVE LEFT AFTER PAYING RENT?

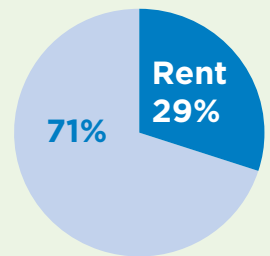
HOUSEHOLDS EARNING HALF OF MEDIAN INCOME OR LESS

MEDIAN INCOME HOUSEHOLDS

Food, Transportation, Health Care, & Other Needs

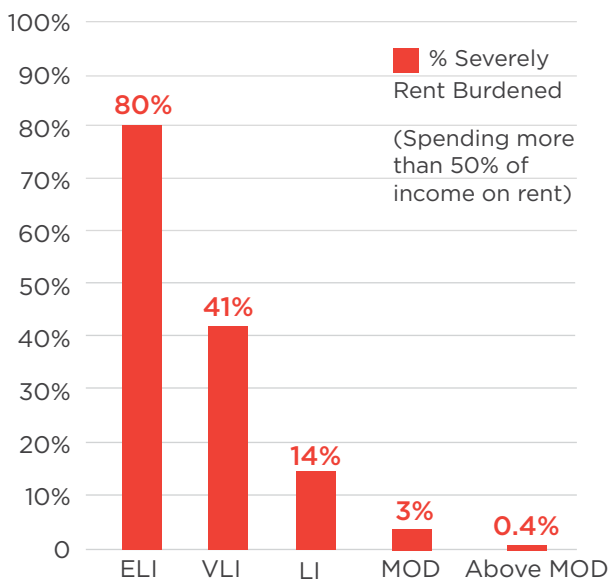


Food, Transportation, Health Care, & Other Needs



Source: NLIHC analysis of 2015 PUMS data.

PERCENTAGE OF SEVERELY BURDENED HOUSEHOLDS BY INCOME GROUP



Source: CHPC analysis of 2015 PUMS data using adapted NLIHC methodology

ABOUT CHPC

THE STATE CREATED THE CALIFORNIA HOUSING PARTNERSHIP NEARLY 30 YEARS AGO AS A PRIVATE NONPROFIT ORGANIZATION WITH A PUBLIC MISSION: TO MONITOR, PROTECT, AND AUGMENT THE SUPPLY OF HOMES AFFORDABLE TO LOWER-INCOME CALIFORNIANS AND TO PROVIDE LEADERSHIP ON AFFORDABLE HOUSING FINANCE AND POLICY. SINCE 1988, THE CALIFORNIA HOUSING PARTNERSHIP HAS ASSISTED NEARLY 200 NONPROFIT AND LOCAL GOVERNMENT HOUSING ORGANIZATIONS LEVERAGE MORE THAN \$13 BILLION IN PRIVATE AND PUBLIC FINANCING TO CREATE AND PRESERVE 65,000 AFFORDABLE HOMES.

STATEWIDE POLICY RECOMMENDATIONS

The California Housing Partnership calls on state leaders to take the following actions to provide relief to low-income families struggling with the high cost of housing:

- » Create new sources of long-term revenue dedicated to producing and preserving affordable homes by passing the Building Homes and Jobs Act **(SB 2)** and an expansion of the state Low Income Housing Tax Credit **(AB 71)**.
- » Give voters a chance to approve new state funding for affordable housing by passing the Affordable Housing Bond Act of 2018 **(SB 3)**.
- » Lower the voter approval threshold for local housing infrastructure bonds to 55% as it is for education facility bonds **(ACA 4)**.
- » Reduce the loss of existing affordable homes by strengthening the State Preservation Notice Law through improved monitoring and enforcement **(AB 1521)**.
- » Restore the ability of local governments to require apartment developers to include affordable rental homes within each development **(AB 1505)**.

LOCAL RECOMMENDATIONS FOR LOS ANGELES COUNTY

- » The City of Los Angeles should adopt the Affordable Housing Linkage Fee to create affordable homes. The County and other Cities in the county should adopt linkage fees also.
- » The County should fully fund its Affordable Housing Program as called for in the Board of Supervisors October 2015 motion.
- » Los Angeles County and Cities within it should offer shallow operating subsidies to help developers provide homes for families and seniors earning less than \$20,000 annually who don't qualify for supportive housing.
- » Los Angeles County and Cities throughout the county should award entitlement incentives to developers who include affordable homes.
- » The County and City of Los Angeles should explore and implement policies that encourage the successful siting of permanent supportive housing.
- » Cities in Los Angeles County should follow the lead of Los Angeles and place affordable housing funding initiatives on the ballot.
- » The City of Los Angeles should commit to updating the City's Community Plans with strong equity standards to ensure affordable, sustainable and vibrant neighborhoods.

This report was produced by the California Housing Partnership.

Local policy recommendations provided by:

Southern California Association of NonProfit Housing (SCANPH)

For questions about Los Angeles County's housing need, contact:

Lisa Payne, LPayne@scanph.org, (213) 480-1249 ext. 235



CALIFORNIA

#3*

In **California**, the Fair Market Rent (FMR) for a two-bedroom apartment is **\$1,608**. In order to afford this level of rent and utilities — without paying more than 30% of income on housing — a household must earn **\$5,359** monthly or **\$64,311** annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into an hourly Housing Wage of:

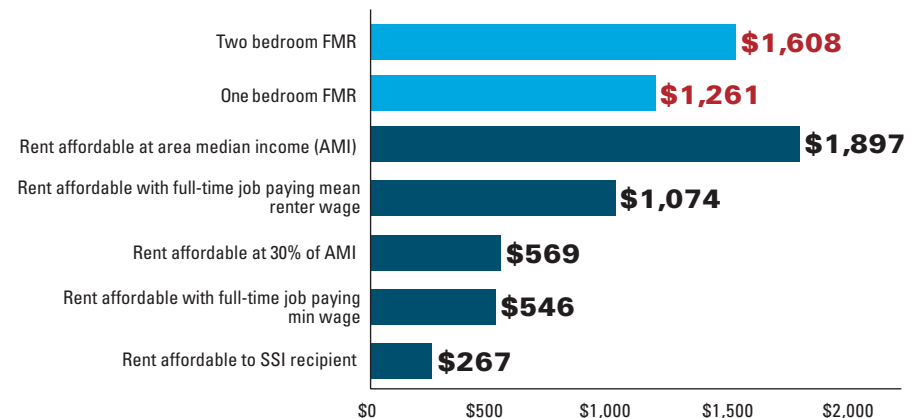
\$30.92
PER HOUR
STATE HOUSING
WAGE

FACTS ABOUT CALIFORNIA:

STATE FACTS	
Minimum Wage	\$10.50
Average Renter Wage	\$20.66
2-Bedroom Housing Wage	\$30.92
Number of Renter Households	5,808,625
Percent Renters	46%

118 Work Hours Per Week At Minimum Wage To Afford a 2-Bedroom Rental Home (at FMR)	92 Work Hours Per Week At Minimum Wage To Afford a 1-Bedroom Rental Home (at FMR)
2.9 Number of Full-Time Jobs At Minimum Wage To Afford a 2-Bedroom Rental Home (at FMR)	2.3 Number of Full-Time Jobs At Minimum Wage To Afford a 1-Bedroom Rental Home (at FMR)

MOST EXPENSIVE AREAS	HOUSING WAGE
San Francisco HMFA	\$58.04
San Jose-Sunnyvale-Santa Clara HMFA	\$42.69
Oakland-Fremont HMFA	\$41.79
Santa Cruz-Watsonville MSA	\$35.15
Santa Ana-Anaheim-Irvine HMFA	\$34.87



* Ranked from Highest to Lowest 2-Bedroom Housing Wage

California	FY17 HOUSING WAGE	HOUSING COSTS			AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS				
		Hourly wage necessary to afford 2 BR ¹ FMR ²	2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI	Monthly rent affordable at 30% of AMI	Renter households (2011-2015)	% of total households (2011-2015)	Estimated hourly mean renter wage (2017)	Monthly rent affordable at mean renter wage
California	\$30.92	\$1,608	\$64,311	2.9	\$75,864	\$1,897	\$22,759	\$569	5,808,625	46%	\$20.66	\$1,074	1.5
Combined Nonmetro Areas	\$18.75	\$975	\$39,002	1.8	\$59,033	\$1,476	\$17,710	\$443	113,957	35%	\$11.52	\$599	1.6
<u>Metropolitan Areas</u>													
Bakersfield MSA	\$16.23	\$844	\$33,760	1.5	\$53,000	\$1,325	\$15,900	\$398	112,575	43%	\$13.23	\$688	1.2
Chico MSA	\$17.75	\$923	\$36,920	1.7	\$62,600	\$1,565	\$18,780	\$470	35,287	41%	\$12.35	\$642	1.4
El Centro MSA	\$15.81	\$822	\$32,880	1.5	\$49,700	\$1,243	\$14,910	\$373	20,675	45%	\$8.41	\$437	1.9
Fresno MSA	\$17.06	\$887	\$35,480	1.6	\$50,000	\$1,250	\$15,000	\$375	139,831	47%	\$12.23	\$636	1.4
Hanford-Corcoran MSA	\$15.44	\$803	\$32,120	1.5	\$50,200	\$1,255	\$15,060	\$377	20,191	49%	\$13.43	\$698	1.1
Los Angeles-Long Beach-Glendale HMFA	\$29.71	\$1,545	\$61,800	2.8	\$64,300	\$1,608	\$19,290	\$482	1,763,190	54%	\$20.00	\$1,040	1.5
Madera MSA	\$17.17	\$893	\$35,720	1.6	\$51,300	\$1,283	\$15,390	\$385	16,884	39%	\$12.32	\$640	1.4
Merced MSA	\$14.92	\$776	\$31,040	1.4	\$48,500	\$1,213	\$14,550	\$364	37,568	48%	\$12.33	\$641	1.2
Modesto MSA	\$18.04	\$938	\$37,520	1.7	\$57,500	\$1,438	\$17,250	\$431	73,242	43%	\$13.64	\$709	1.3
Napa MSA	\$30.73	\$1,598	\$63,920	2.9	\$91,000	\$2,275	\$27,300	\$683	19,816	40%	\$17.24	\$897	1.8
Oakland-Fremont HMFA	\$41.79	\$2,173	\$86,920	4.0	\$97,400	\$2,435	\$29,220	\$731	400,241	42%	\$21.29	\$1,107	2.0
Oxnard-Thousand Oaks-Ventura MSA	\$33.88	\$1,762	\$70,480	3.2	\$85,600	\$2,140	\$25,680	\$642	96,360	36%	\$16.98	\$883	2.0
Redding MSA	\$17.15	\$892	\$35,680	1.6	\$61,800	\$1,545	\$18,540	\$464	26,044	38%	\$12.39	\$645	1.4
Riverside-San Bernardino-Ontario MSA *	\$23.02	\$1,197	\$47,880	2.2	\$63,200	\$1,580	\$18,960	\$474	493,904	38%	\$13.38	\$696	1.7
Sacramento--Roseville--Arden-Arcade HMFA	\$19.92	\$1,036	\$41,440	1.9	\$75,200	\$1,880	\$22,560	\$564	290,705	40%	\$15.86	\$825	1.3
Salinas MSA	\$27.25	\$1,417	\$56,680	2.6	\$63,100	\$1,578	\$18,930	\$473	63,655	51%	\$15.09	\$785	1.8
San Benito County HMFA	\$28.65	\$1,490	\$59,600	2.7	\$73,400	\$1,835	\$22,020	\$551	6,420	37%	\$13.85	\$720	2.1
San Diego-Carlsbad MSA *	\$33.48	\$1,741	\$69,640	3.2	\$79,300	\$1,983	\$23,790	\$595	515,078	47%	\$19.92	\$1,036	1.7
San Francisco HMFA	\$58.04	\$3,018	\$120,720	5.5	\$115,300	\$2,883	\$34,590	\$865	369,819	52%	\$35.40	\$1,841	1.6

* 50th percentile FMR (See Appendix B).

1: BR = Bedroom

2: FMR = Fiscal Year 2017 Fair Market Rent.

3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix B.

4: AMI = Fiscal Year 2017 Area Median Income

5: "Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.

California	FY17 HOUSING WAGE	HOUSING COSTS			AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS					
		Hourly wage necessary to afford 2 BR ¹ FMR ²	2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI	Monthly rent affordable at 30% of AMI	Renter households (2011-2015)	% of total households (2011-2015)	Estimated hourly mean renter wage (2017)	Monthly rent affordable at mean renter wage	Full-time jobs at mean renter wage needed to afford 2 BR FMR
	San Jose-Sunnyvale-Santa Clara HMFA	\$42.69	\$2,220	\$88,800	4.1	\$113,300	\$2,833	\$33,990	\$850	268,627	43%	\$39.89	\$2,074	1.1
	San Luis Obispo-Paso Robles-Arroyo Grande MSA	\$25.17	\$1,309	\$52,360	2.4	\$83,200	\$2,080	\$24,960	\$624	43,862	42%	\$13.36	\$695	1.9
	Santa Ana-Anaheim-Irvine HMFA	\$34.87	\$1,813	\$72,520	3.3	\$88,000	\$2,200	\$26,400	\$660	427,202	42%	\$19.89	\$1,034	1.8
	Santa Cruz-Watsonville MSA	\$35.15	\$1,828	\$73,120	3.3	\$83,300	\$2,083	\$24,990	\$625	40,174	42%	\$14.06	\$731	2.5
	Santa Maria-Santa Barbara MSA	\$29.90	\$1,555	\$62,200	2.8	\$73,900	\$1,848	\$22,170	\$554	68,630	48%	\$16.63	\$865	1.8
	Santa Rosa MSA	\$30.23	\$1,572	\$62,880	2.9	\$83,900	\$2,098	\$25,170	\$629	76,192	41%	\$17.15	\$892	1.8
	Stockton-Lodi MSA	\$18.60	\$967	\$38,680	1.8	\$61,100	\$1,528	\$18,330	\$458	94,986	43%	\$13.27	\$690	1.4
	Vallejo-Fairfield MSA	\$24.88	\$1,294	\$51,760	2.4	\$80,400	\$2,010	\$24,120	\$603	57,533	40%	\$16.85	\$876	1.5
	Visalia-Porterville MSA	\$16.79	\$873	\$34,920	1.6	\$47,300	\$1,183	\$14,190	\$355	57,885	43%	\$11.05	\$575	1.5
	Yolo HMFA	\$22.60	\$1,175	\$47,000	2.2	\$74,700	\$1,868	\$22,410	\$560	34,493	48%	\$13.72	\$713	1.6
	Yuba City MSA	\$17.04	\$886	\$35,440	1.6	\$55,500	\$1,388	\$16,650	\$416	23,599	41%	\$12.04	\$626	1.4
Counties														
	Alameda County	\$41.79	\$2,173	\$86,920	4.0	\$97,400	\$2,435	\$29,220	\$731	264,263	47%	\$21.99	\$1,143	1.9
	Alpine County	\$16.27	\$846	\$33,840	1.5	\$74,200	\$1,855	\$22,260	\$557	76	21%	\$11.75	\$611	1.4
	Amador County	\$19.46	\$1,012	\$40,480	1.9	\$70,900	\$1,773	\$21,270	\$532	3,348	24%	\$10.26	\$534	1.9
	Butte County	\$17.75	\$923	\$36,920	1.7	\$62,600	\$1,565	\$18,780	\$470	35,287	41%	\$12.35	\$642	1.4
	Calaveras County	\$16.67	\$867	\$34,680	1.6	\$69,200	\$1,730	\$20,760	\$519	3,794	21%	\$10.37	\$539	1.6
	Colusa County	\$15.81	\$822	\$32,880	1.5	\$58,300	\$1,458	\$17,490	\$437	2,635	38%	\$13.30	\$692	1.2
	Contra Costa County	\$41.79	\$2,173	\$86,920	4.0	\$97,400	\$2,435	\$29,220	\$731	135,978	35%	\$19.85	\$1,032	2.1
	Del Norte County	\$17.12	\$890	\$35,600	1.6	\$54,100	\$1,353	\$16,230	\$406	3,716	39%	\$9.90	\$515	1.7
	El Dorado County	\$19.92	\$1,036	\$41,440	1.9	\$75,200	\$1,880	\$22,560	\$564	17,225	26%	\$11.75	\$611	1.7
	Fresno County	\$17.06	\$887	\$35,480	1.6	\$50,000	\$1,250	\$15,000	\$375	139,831	47%	\$12.23	\$636	1.4
	Glenn County	\$14.90	\$775	\$31,000	1.4	\$53,600	\$1,340	\$16,080	\$402	3,642	38%	\$11.92	\$620	1.3
	Humboldt County	\$19.73	\$1,026	\$41,040	1.9	\$54,500	\$1,363	\$16,350	\$409	23,908	45%	\$11.39	\$592	1.7

* 50th percentile FMR (See Appendix B).

1: BR = Bedroom

2: FMR = Fiscal Year 2017 Fair Market Rent.

3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix B.

4: AMI = Fiscal Year 2017 Area Median Income

5: "Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.

California	FY17 HOUSING WAGE	HOUSING COSTS			AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS				
		Hourly wage necessary to afford 2 BR ¹ FMR ²	2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI	Monthly rent affordable at 30% of AMI	Renter households (2011-2015)	% of total households (2011-2015)	Estimated hourly mean renter wage (2017)	Monthly rent affordable at mean renter wage
Imperial County	\$15.81	\$822	\$32,880	1.5	\$49,700	\$1,243	\$14,910	\$373	20,675	45%	\$8.41	\$437	1.9
Inyo County	\$16.88	\$878	\$35,120	1.6	\$71,200	\$1,780	\$21,360	\$534	2,847	36%	\$12.74	\$662	1.3
Kern County	\$16.23	\$844	\$33,760	1.5	\$53,000	\$1,325	\$15,900	\$398	112,575	43%	\$13.23	\$688	1.2
Kings County	\$15.44	\$803	\$32,120	1.5	\$50,200	\$1,255	\$15,060	\$377	20,191	49%	\$13.43	\$698	1.1
Lake County	\$17.60	\$915	\$36,600	1.7	\$46,200	\$1,155	\$13,860	\$347	9,979	37%	\$11.61	\$604	1.5
Lassen County	\$17.63	\$917	\$36,680	1.7	\$68,800	\$1,720	\$20,640	\$516	3,392	35%	\$10.49	\$546	1.7
Los Angeles County	\$29.71	\$1,545	\$61,800	2.8	\$64,300	\$1,608	\$19,290	\$482	1,763,190	54%	\$20.00	\$1,040	1.5
Madera County	\$17.17	\$893	\$35,720	1.6	\$51,300	\$1,283	\$15,390	\$385	16,884	39%	\$12.32	\$640	1.4
Marin County	\$58.04	\$3,018	\$120,720	5.5	\$115,300	\$2,883	\$34,590	\$865	38,941	38%	\$19.21	\$999	3.0
Mariposa County	\$16.62	\$864	\$34,560	1.6	\$65,500	\$1,638	\$19,650	\$491	2,121	29%	\$10.70	\$556	1.6
Mendocino County	\$19.83	\$1,031	\$41,240	1.9	\$59,500	\$1,488	\$17,850	\$446	14,338	42%	\$10.49	\$545	1.9
Merced County	\$14.92	\$776	\$31,040	1.4	\$48,500	\$1,213	\$14,550	\$364	37,568	48%	\$12.33	\$641	1.2
Modoc County	\$13.10	\$681	\$27,240	1.2	\$48,000	\$1,200	\$14,400	\$360	978	26%	\$9.45	\$491	1.4
Mono County	\$22.88	\$1,190	\$47,600	2.2	\$75,800	\$1,895	\$22,740	\$569	1,987	41%	\$12.97	\$674	1.8
Monterey County	\$27.25	\$1,417	\$56,680	2.6	\$63,100	\$1,578	\$18,930	\$473	63,655	51%	\$15.09	\$785	1.8
Napa County	\$30.73	\$1,598	\$63,920	2.9	\$91,000	\$2,275	\$27,300	\$683	19,816	40%	\$17.24	\$897	1.8
Nevada County	\$25.17	\$1,309	\$52,360	2.4	\$69,600	\$1,740	\$20,880	\$522	11,310	28%	\$12.84	\$668	2.0
Orange County	\$34.87	\$1,813	\$72,520	3.3	\$88,000	\$2,200	\$26,400	\$660	427,202	42%	\$19.89	\$1,034	1.8
Placer County	\$19.92	\$1,036	\$41,440	1.9	\$75,200	\$1,880	\$22,560	\$564	40,490	30%	\$15.70	\$816	1.3
Plumas County	\$15.98	\$831	\$33,240	1.5	\$62,600	\$1,565	\$18,780	\$470	2,275	28%	\$9.22	\$479	1.7
Riverside County *	\$23.02	\$1,197	\$47,880	2.2	\$63,200	\$1,580	\$18,960	\$474	246,093	35%	\$13.17	\$685	1.7
Sacramento County	\$19.92	\$1,036	\$41,440	1.9	\$75,200	\$1,880	\$22,560	\$564	232,990	45%	\$16.29	\$847	1.2
San Benito County	\$28.65	\$1,490	\$59,600	2.7	\$73,400	\$1,835	\$22,020	\$551	6,420	37%	\$13.85	\$720	2.1
San Bernardino County *	\$23.02	\$1,197	\$47,880	2.2	\$63,200	\$1,580	\$18,960	\$474	247,811	40%	\$13.57	\$706	1.7
San Diego County *	\$33.48	\$1,741	\$69,640	3.2	\$79,300	\$1,983	\$23,790	\$595	515,078	47%	\$19.92	\$1,036	1.7
San Francisco County	\$58.04	\$3,018	\$120,720	5.5	\$115,300	\$2,883	\$34,590	\$865	224,589	64%	\$37.53	\$1,952	1.5

* 50th percentile FMR (See Appendix B).

1: BR = Bedroom
2: FMR = Fiscal Year 2017 Fair Market Rent.
3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix B.
4: AMI = Fiscal Year 2017 Area Median Income
5: "Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.

California

FY17 HOUSING WAGE

HOUSING COSTS

AREA MEDIAN INCOME (AMI)

RENTER HOUSEHOLDS

	Hourly wage necessary to afford 2 BR ¹ FMR ²	2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI	Monthly rent affordable at 30% of AMI	Renter households (2011-2015)	% of total households (2011-2015)	Estimated hourly mean renter wage (2017)	Monthly rent affordable at mean renter wage	Full-time jobs at mean renter wage needed to afford 2 BR FMR
San Joaquin County	\$18.60	\$967	\$38,680	1.8	\$61,100	\$1,528	\$18,330	\$458	94,986	43%	\$13.27	\$690	1.4
San Luis Obispo County	\$25.17	\$1,309	\$52,360	2.4	\$83,200	\$2,080	\$24,960	\$624	43,862	42%	\$13.36	\$695	1.9
San Mateo County	\$58.04	\$3,018	\$120,720	5.5	\$115,300	\$2,883	\$34,590	\$865	106,289	41%	\$36.35	\$1,890	1.6
Santa Barbara County	\$29.90	\$1,555	\$62,200	2.8	\$73,900	\$1,848	\$22,170	\$554	68,630	48%	\$16.63	\$865	1.8
Santa Clara County	\$42.69	\$2,220	\$88,800	4.1	\$113,300	\$2,833	\$33,990	\$850	268,627	43%	\$39.89	\$2,074	1.1
Santa Cruz County	\$35.15	\$1,828	\$73,120	3.3	\$83,300	\$2,083	\$24,990	\$625	40,174	42%	\$14.06	\$731	2.5
Shasta County	\$17.15	\$892	\$35,680	1.6	\$61,800	\$1,545	\$18,540	\$464	26,044	38%	\$12.39	\$645	1.4
Sierra County	\$22.13	\$1,151	\$46,040	2.1	\$59,500	\$1,488	\$17,850	\$446	271	22%	\$5.17	\$269	4.3
Siskiyou County	\$15.65	\$814	\$32,560	1.5	\$47,500	\$1,188	\$14,250	\$356	6,934	36%	\$10.50	\$546	1.5
Solano County	\$24.88	\$1,294	\$51,760	2.4	\$80,400	\$2,010	\$24,120	\$603	57,533	40%	\$16.85	\$876	1.5
Sonoma County	\$30.23	\$1,572	\$62,880	2.9	\$83,900	\$2,098	\$25,170	\$629	76,192	41%	\$17.15	\$892	1.8
Stanislaus County	\$18.04	\$938	\$37,520	1.7	\$57,500	\$1,438	\$17,250	\$431	73,242	43%	\$13.64	\$709	1.3
Sutter County	\$17.04	\$886	\$35,440	1.6	\$55,500	\$1,388	\$16,650	\$416	13,053	41%	\$11.50	\$598	1.5
Tehama County	\$15.83	\$823	\$32,920	1.5	\$51,300	\$1,283	\$15,390	\$385	7,696	32%	\$13.02	\$677	1.2
Trinity County	\$15.63	\$813	\$32,520	1.5	\$50,800	\$1,270	\$15,240	\$381	1,706	31%	\$9.22	\$479	1.7
Tulare County	\$16.79	\$873	\$34,920	1.6	\$47,300	\$1,183	\$14,190	\$355	57,885	43%	\$11.05	\$575	1.5
Tuolumne County	\$18.63	\$969	\$38,760	1.8	\$60,200	\$1,505	\$18,060	\$452	7,004	32%	\$11.99	\$623	1.6
Ventura County	\$33.88	\$1,762	\$70,480	3.2	\$85,600	\$2,140	\$25,680	\$642	96,360	36%	\$16.98	\$883	2.0
Yolo County	\$22.60	\$1,175	\$47,000	2.2	\$74,700	\$1,868	\$22,410	\$560	34,493	48%	\$13.72	\$713	1.6
Yuba County	\$17.04	\$886	\$35,440	1.6	\$55,500	\$1,388	\$16,650	\$416	10,546	42%	\$13.37	\$695	1.3

* 50th percentile FMR (See Appendix B).

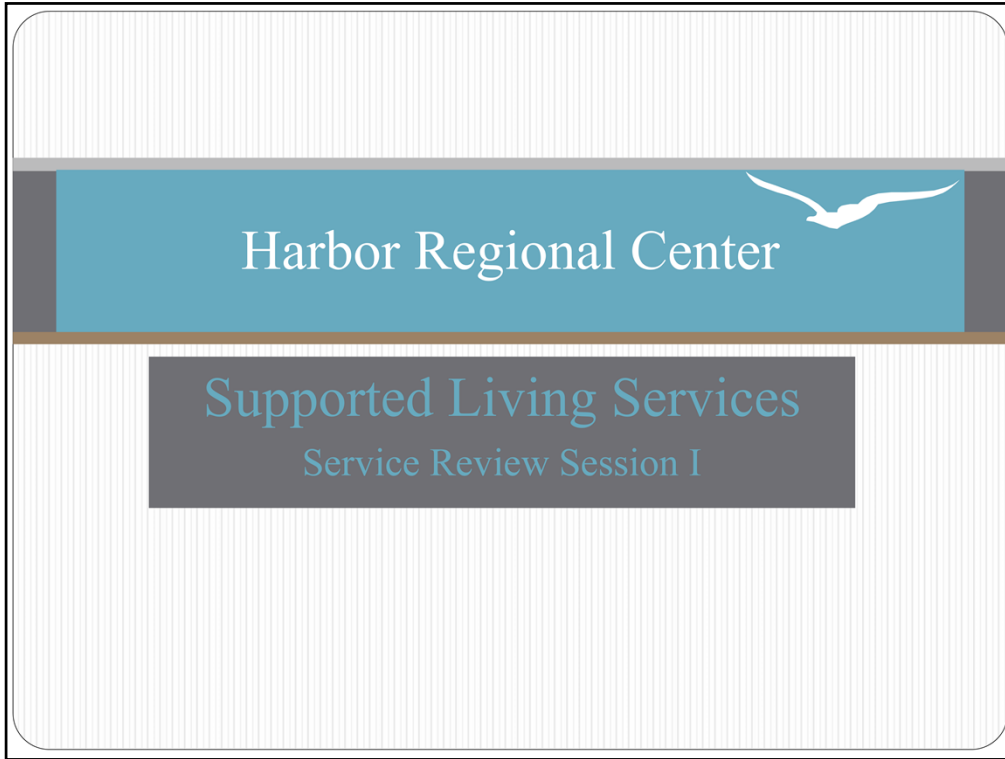
1: BR = Bedroom

2: FMR = Fiscal Year 2017 Fair Market Rent.

3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix B.

4: AMI = Fiscal Year 2017 Area Median Income

5: "Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.



Welcome

HRC Board Review Panel - Roles

- Joe Czarske – HRC Board Treasurer, ARCA Representative and Parent
- Bob Irlen – HRC Board Advisor and Parent
- Patricia Jordan – HRC Board Chair of Client Services Committee and Client
- Mariano Sanz – HRC Board President and Parent

- To ensure that we have a comprehensive review of our policies and practices;
- To ensure that we gather input from all interested clients, families, staff and service providers;
- To provide a complete report of the review to the full HRC board and make any recommendations indicated for changes to service policies

member panel: Joe Czarske, Bob Irlen, Patricia Jordan, Mariano Sanz

role of the panel is:

- **to ensure that we have a comprehensive review of our policies and practices;**
- **to ensure that we gather input from all interested clients, families, staff and service providers;**
- **to provide a complete report of the review to the full HRC Board and make any recommendations indicated for changes to service policies**

HRC Staff Facilitators - Roles

- Hiram Bond – HRC Client Services Manager – Adults
- Isabel Cueva – HRC Client Services Manager – Early Childhood
- Judy Taimi – HRC Client Services Manager – Children

- Facilitators are taking notes to ensure that key points are captured
- Facilitators will also ensure that all questions and comments are captured so that if we do not have time for full answers at any given session, questions will not be forgotten and can be answered at a future review session
- Facilitators are keeping a record of those participating (so be sure to sign in with them) so that we can follow up where needed and especially with those who indicate they have an individual/personal matter to discuss

HRC Staff Facilitators: Hiram Bond, Isabel Cueva, Judy Taimi

the facilitators :

- **are taking notes to ensure that key points are captured**
- **will also ensure that all questions and comments are captured so that if we do not have time for full answers at any given session, questions will not be forgotten and can be answered at a future review session**
- **are keeping a record of those participating (so be sure to sign in with them) so that we can follow up where needed and especially with those who indicate they have an individual/personal matter to discuss**

Meeting Guidelines

- We request that all guests **sign in** and we ask that you to leave your contact information where indicated if you would like to receive follow up information that may be available
- We encourage those interested in the service under review **to attend all review sessions** that are planned in order to get a comprehensive understanding of the policies and practices currently in place
- As we have a large amount of material to cover, we request that participants **hold their questions to the end** of each session; please know that we will make every effort to provide responses for all questions at some point in the review process
- We understand there may be some guests who have **questions related to themselves or their family member's circumstances**; please be assured we would like to address these questions or concerns with you but will need to do so **privately** and not as part of these service reviews

Meeting Protocol in the Packets

- We request that all guests **sign in** and we ask that you to leave your contact information where indicated if you would like to receive follow up information that may be available
- We encourage those interested in the service under review to **attend all review sessions** that are planned in order to get a comprehensive understanding of the policies and practices currently in place
- As we have a large amount of material to cover, we request that participants **hold their questions** to the end of each session; please know that we will make time for questions and comments at the end of each review session and we will make every effort to provide responses for all questions at some point in the review process
- We understand there may be some **guests who have questions related to themselves or their family member's** circumstances; please be assured we would like to address these questions or concerns with you but will need to do so **privately** and not as part of these service reviews

Summary of Review Sessions

- **First Meeting-** a brief **overview** of HRC supported living services (SLS); provisions of the **Lanterman Act** and the **regulations** applicable to SLS; share HRC **materials** about SLS; review HRC's current policy on SLS and share other RC policies; explore the **critical issues** related to SLS
- **Second Meeting-** we will share information on the **number and demographics** of HRC SLS clients; share information about our **service providers**; review the HRC **Expectations for SLS**, our **assessment formats** and progress reporting guidelines and some of the **materials** about SLS that are available in our HRC Resource Center.
- **Third Meeting-** will be dedicated to **presentations from two of the SLS service providers** working with HRC clients. And we will hear from a **client** who participates in one of these programs.
- **Fourth Meeting-** we will facilitate a **discussion** among those who have attended and participated in the prior three meetings.
- **Fifth Meeting-** We will review and **discuss the draft report** which will have been produced based upon all discussion and input and posted in advance

Summary of Review Sessions in the Packets

- **First Meeting-** a brief **overview** of HRC supported living services (SLS); provisions of the **Lanterman Act** and the **regulations** applicable to SLS; share HRC **materials** about SLS; review HRC's current **policy** on SLS and share other RC policies; explore the **critical issues** related to SLS
- **Second Meeting-** we will share information on the **number and demographics** of HRC SLS clients; share information about our **service providers**; review the HRC **Expectations** for SLS, our **assessment formats** and progress reporting **guidelines** and some of the materials about SLS that are available in our HRC **Resource Center**.
- **Third Meeting-** will be dedicated to **presentations** from two of the **SLS service providers** working with HRC clients. And we will hear from a **client** who participates in one of these programs.
- **Fourth Meeting-** we will facilitate a **discussion** among those who have attended and participated in the prior three meetings.
- **Fifth Meeting-** We will **review and discuss the draft report** which will have been produced based upon all discussion and input and posted in advance

What is Supported Living?

- Supported living services consist of **any individually designed services**, or assessment for services, which assist a client to:
 - Live in his **own home with supports** available as often and for as long as needed;
 - **Choose** where and with whom to live;
 - **Control** the character and appearance of the environment of his/her home;
 - Build **relationships** with others; and
 - Make fundamental **life decisions**;

Supported living services consist of any individually designed services, or assessment for services, which assist a client to:

- **Live in his own home with supports available as often and for as long as needed**
- **Choose where and with whom to live;**
- **Control the character and appearance of the environment of his/her home;**
- **Build relationships with others; and**
- **Make fundamental life decisions**

Lanterman Act – Key Provisions

- Typical Living Arrangements
- Client Choice and Preferences
- Control Over Environment
- Flexibility
- Not Restricted Based Upon Nature and Severity of Disability
- Full Use of Generics/IHSS
- Rent
- Cost-effective
- Assessments



Lanterman Act Provisions Re SLS

- Typical Living Arrangements
- Client Choice and Preferences
- Control Over Environment
- Flexibility
- Not Restricted Based Upon Nature and Severity of Disability
- Full Use of Generics/IHSS
- Rent
- Cost-effective
- Assessments

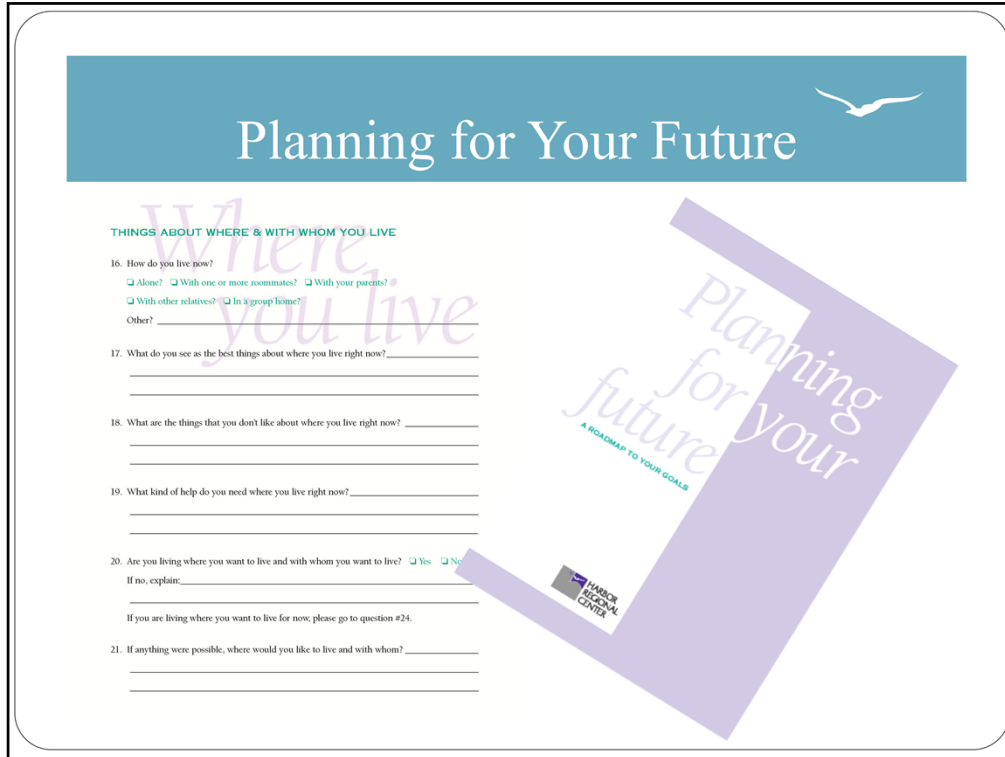
Regulations – Key Provisions

- **Some of the Key Provisions:**
 - Regional Center Responsibilities
 - Housing Financial Involvement and Responsibilities
 - Vendor Status Requirements
 - Eligibility
 - Service & Support Components
 - Records
 - Costs
 - Rates
 - Service Design
 - Standards for Staff



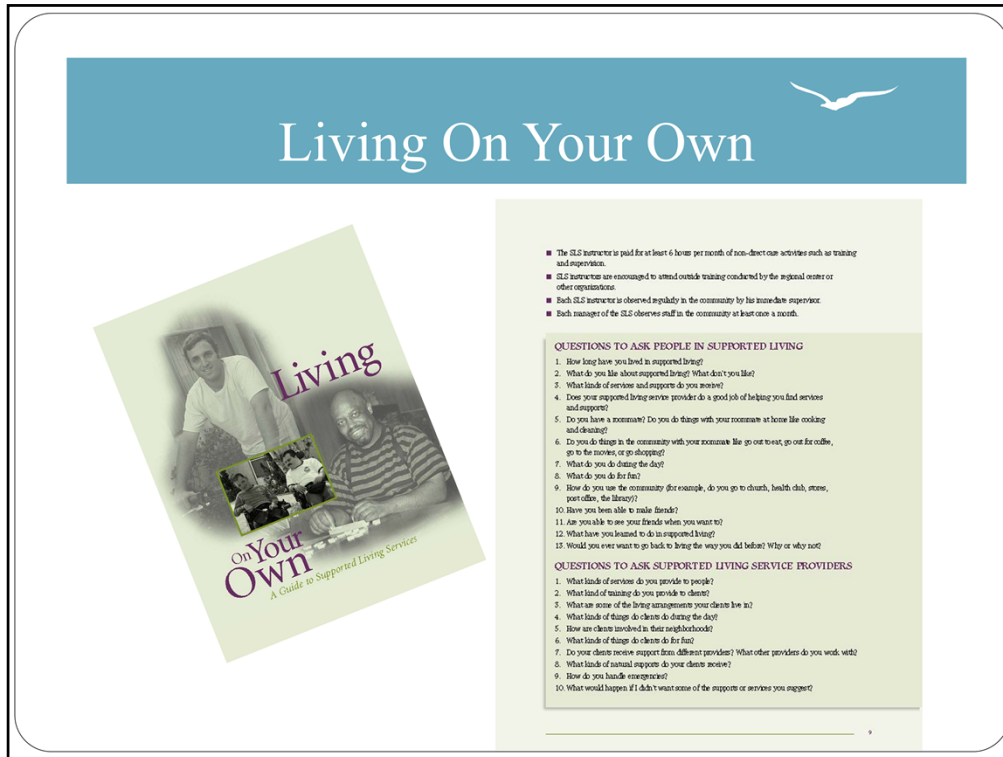
Title 17 Provisions Re SLS

- **58610 – Regional Center Responsibilities**
- **Housing Financial Involvement and Responsibilities**
- **Vendor Status Requirements**
- **Eligibility**
- **Service & Support Components**
- **Client Preferences & Leadership**
- **Records**
- **Costs**
- **Rates**
- **Service Design**
- **Standards for Staff**



Handout “Planning for Your Future”

- **Booklet was designed to assist clients to prepare for their IPP and also to provide guidance for SC’s to make sure all areas are addressed**
- **Booklet needs to be revised – suggestions are welcomed**
- **However.....please check out page 5 – questions about living arrangements**



Handout...the HRC Booklet “Living On Your Own”

- **Booklet needs to be revised but addresses some preliminary questions that people considering SLS might have**
- **Also contains the HRC Guidelines for SLS service providers; these have been modified since the booklet was published and we are planning to review the current guidelines during our next session**
- **If you take a look at page 9 of the booklet you will see a list of questions for people considering SLS to ask people who already live in a SLS setting...and another list to ask SLS service providers; we think the lists need to be updated but do want to include something similar when we revise the booklet... suggestions are welcome**

Adult Living Options

In addition to all of the people mentioned, you will be encouraged to maintain an active role in your relative's life when he is living away from your home. Your observations are most important and we will count on you to let us know if you see anything that would require us to increase our assistance to the home. In case you have a concern or see something that requires follow-up, we are only a phone call away. Our staff respond promptly to all calls alerting us to potential problems or a need for intervention.

What is Supported Living?

In supported living, people with disabilities live in their own homes, apartments, or condos in the community. Most of the time they pay rent, but sometimes they may even buy the place where they live. People in supported living may live alone, with a loved one, with a friend, or with a roommate.

The purpose of supported living is to give people with disabilities the help they need to live as independently as possible in the community. Anyone, regardless of his level or type of disability, may live in the community, but almost everyone needs some kind of help to do this successfully. The regional center assists people to find the right help.

A person wanting to live on his own may need help learning to cook, to clean houses, or to ride the bus. Most people, however, also need ongoing support. This may include, for example, assistance and support to make sure their bills are paid on time and to maintain their health.

Some of the support that people with developmental disabilities need in order to live on their own may be the kinds of things that friends or family members can do. This kind of support is called "natural support." For example, friends may take a person to church or synagogue. Parents, brothers, or sisters may help them get furniture for

IT'S ALL ABOUT OPTIONS - Living Alternatives for Adults with Developmental Disabilities 7

HARBOR REGIONAL CENTER

Handout...HRC Booklet “Adult Living Options”

- **This booklet is also on our list to update and revise; it sets forth all of the various options for adults and their families to consider if they are planning to move out of the family home**
- **On pages 7 and 8 you will find a little bit of information about supported living services and we hope that you will review this material and provide your ideas for us to include in an updated version of the booklet**



When we return we will share the current HRC SLS Policy as well as other regional centers' policies... and we will discuss some of the barriers to SLS and other considerations that affect SLS services

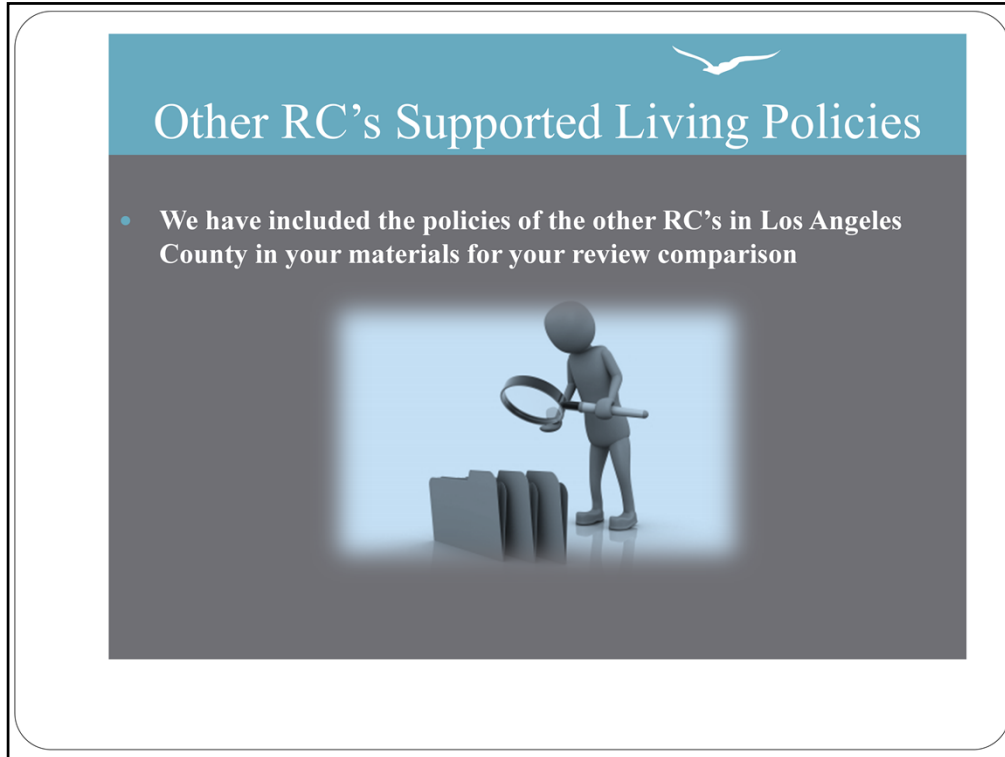
HRC Supported Living Policy

Harbor Regional Center may purchase supported living services for a client only if all of the following criteria are met:

1. the client is at least **18** years of age;
2. the client and, where appropriate, his/her conservator, have, with full knowledge of the inherent risks, **chosen** supported living as the appropriate and desired living option;
3. the client has, or is eligible to receive, the **financial resources** necessary to pay **for rent/mortgage, utilities, food, clothing** and all other typical daily living expenses;
4. every feasible alternative source of service and support has been explored and utilized including **natural supports, community supports and generic supports**

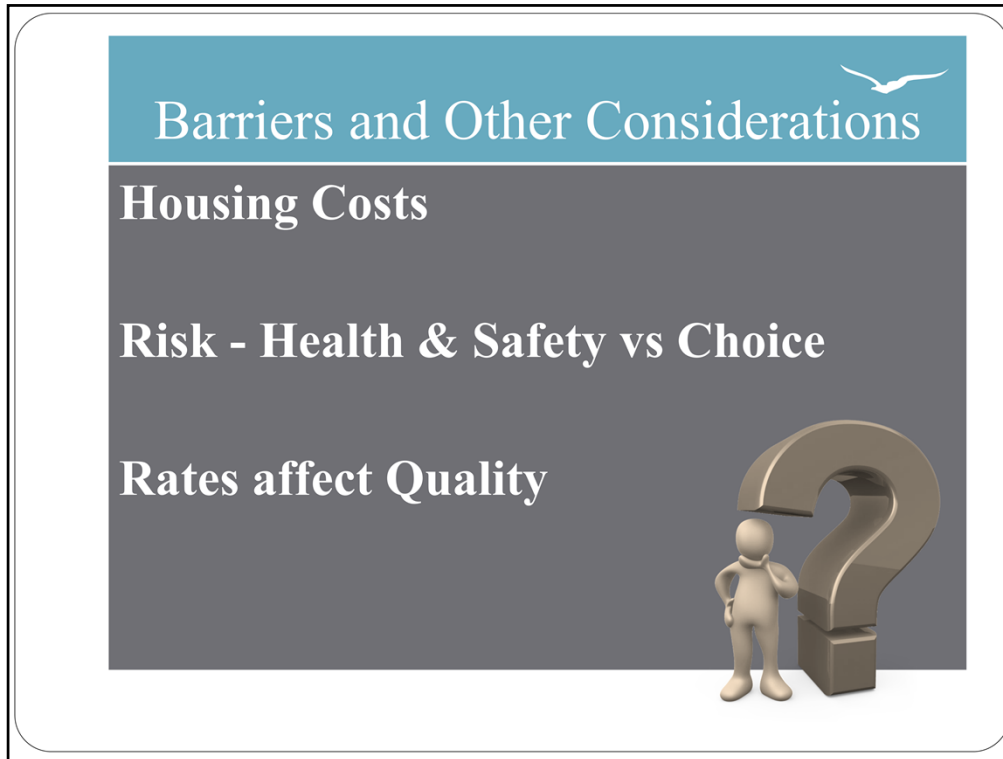
Harbor Regional Center's **philosophy** is that a living arrangement should be based upon **client choice** and that the role of the service coordination team is to help the client who wants to live in his own home or apartment to identify the supports needed in order to realize this goal. **HRC policy** states:

- the client is at least **18 years** of age;
- the client and, where appropriate, his/her conservator, have, with full **knowledge of the inherent risks**, chosen supported living as the appropriate and desired living option;
- the client has, or is eligible to receive, the **financial resources** necessary to pay for rent/mortgage, utilities, food, clothing and all other typical daily living expenses;
- every feasible **alternative source of service and support** has been explored and utilized including natural supports, community supports and generic supports



We have included the SLS policies of the other regional centers in Los Angeles County as comparison for our review.

They do tend to include more of the specifics that are set forth in both the Lanterman Act and the regulations...as opposed to HRC's more simplified approach...something to consider as we make suggestions for revisions to our policy



Housing costs are becoming a major barrier to accessing SLS services...(we will speak in more detail about this matter in a few minutes)

There are two more issues that we will discuss in more detail in future review sessions:

- We definitely want to promote client choice in all things; but...what if clients choose lifestyles and activities which might jeopardize their health and safety?
- The people who provide personal care, guidance and supervision for our clients in SLS deserve to make a living wage; rates DO affect quality of services and cannot remain frozen!

What is the role of the HRC Board with respect to these matters??

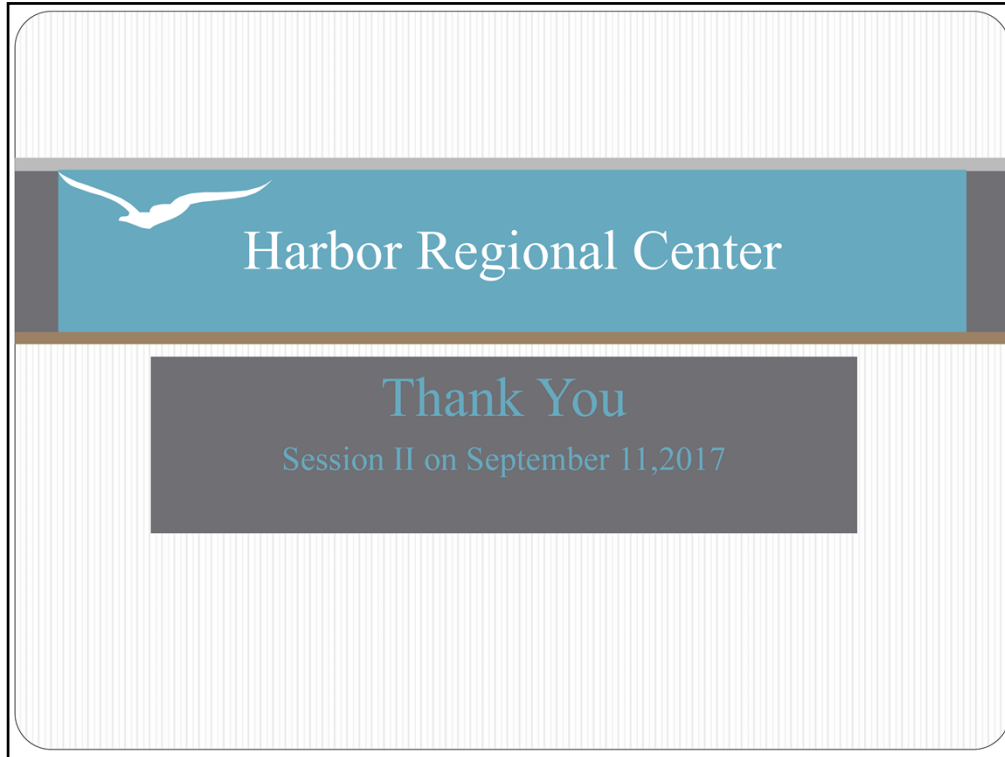
The infographic is titled "Affordable Housing" in white text on a teal background. Below the title, on a dark grey background, is the text: "Today, an individual earning minimum wage would need to work 89 hours a week to afford a modest one-bedroom apartment, and per the Los Angeles Homeless Services Authority, there are currently 1,483 people with developmental disabilities homeless in LA County." Below this is another paragraph: "Housing costs have become a significant barrier ...preventing regional center clients from accessing living arrangements outside of the family home, especially supported living arrangements, even in barely marginally safe neighborhoods." In the bottom right corner of the infographic is the HOPE logo, which consists of a stylized house icon with two human figures inside, followed by the word "HOPE" in large blue letters and the tagline "Home Ownership for Personal Empowerment" in smaller blue letters below it.

All regional centers have a role in identifying and promoting the need for public policy change when they find compelling reason to do so.

HRC clients are vulnerable and should be able to live in reasonably safe and secure neighborhoods.

The lack of affordable housing even in only remotely safe neighborhoods is a major deterrent to SLS.

We have asked Kristin Martin, Director of Home Ownership for Personal Empowerment, to provide a brief overview of this issue for us tonight.



Next time we plan to share:

- information on the number and demographics of HRC SLS clients;
- information about our service providers;
- the HRC Expectations for SLS, our assessment formats and progress reporting guidelines and some of the materials about SLS that are available in our HRC Resource Center.

Thank you for participating with us tonight and we look forward to seeing you on September 11 for our second session.