

FY 2020-2021 Purchase of Service Annual Report W&I Code Section 4519.5(e)-(f) June 23, 2022

1) GGRC - POS Data Public Meeting

GGRC's public meeting to discuss POS data was held on March 29, 2022, and March 31, 2022, from 6pm to 8pm as a Webinar on the virtual platform Zoom. (See presentation attached to this report). Both meetings offered Cantonese, Spanish and American Sign Language Interpretation.

Flyers were posted and distributed 30 days before the Public Meeting date, on March 1st, 2022, in English, Spanish, and Traditional Chinese. In addition to posting on GGRC's website, the flyer and information was distributed in the following ways, including but not limited to:

- Shared with All GGRC staff
- Shared with Service Provider Advisory Committee email distribution list
- Distributed to local Family Resource Centers to distribute to parent groups
- Distributed to the GGRC Board Members
- Posted on the GGRC Facebook page

Flyers provided information on how to register for the virtual event as well as instructions on how to access the Spanish and Cantonese interpretation using Zoom language channels, and ASL interpretation. Further instruction was provided during the Public Meeting prior to the start of the presentation. The instruction portion of the presentation used a slide with instructions in English, Spanish and Traditional Chinese. All participants were given time to access the interpretation options effectively before the meeting officially began. The presentation was conducted in English with simultaneous interpretation for Spanish, Cantonese, and ASL. The presentation also included a PowerPoint presentation with data charts; a link was shared to the attendees that allowed them to follow along with the presentation. The presentation was conducted in all the previously mentioned languages. The presentation was conducted in plain language and included definitions of frequently used terms. The translated versions of PowerPoint Presentation, in both Spanish and Traditional Chinese were made available before the presentation.

16 individuals RSVP'd for the March 29th Public Meeting, including 5 GGRC staff members. Of the 16 RSVP's 11 people attended the Webinar, 3 of which were GGRC staff members. For the March 29th event, there were 10 panelists: 2 ASL interpreters, 2 Spanish-speaking interpreters, 2 Cantonese interpreters, 1 Representative from PRAGNYA, GGRC's Director of Community Services, Executive Director and the Cultural Diversity Specialist. 17 people RSVP'd for the March 31st Public Meetings including 4 GGRC Staff members. There were 12 attendees For the March 31st event, including 4 staff attendees. 10 panelists participated: 2 ASL interpreters, 2 Spanish-speaking interpreters, 2 Cantonese interpreters, 1 Representative from PRAGNYA, GGRC's Director of Community Services, Executive Director and the Cultural Diversity Specialist. Attendees represented for both events also included parents, individuals served, service providers and Department of Developmental Services Staff.



suggestions at the end of the presentation (please see notes on public comments in this document).

In addition to the Public Meeting, the POS data and related information was presented at the GGRC Board of Directors Meeting on February 15th, 2022, at GGRC's self-advocacy group on April 6th, 2022 and, with the AbilityPath Autism Support Groups, both English and Spanish speaking on June 7th and 14th 2022.

2) FY 2020-2021 POS Data - Public Meeting Minutes

- A. <u>What is the role of the Regional Center?</u>
 - Golden Gate Regional Center (GGRC) is 1 of 21 Regional Centers in California serving San Francisco, San Mateo, and Marin County. GGRC provides services and supports for people with developmental disabilities.
 - b. In addition to case management, GGRC funded services include but are not limited to independent living supports, respite & personal assistance, day program, and transportation.
 - c. GGRC is the "payer of last resort" –generic resources are identified and used before GGRC can authorize a service.
- B. <u>Purpose of Meeting</u>
 - d. History: Welfare & Institutions Code 4519.5
 - i. Regional Centers will hold public meetings to review Purchase of Service (POS) Data
 - ii. A review of POS data identified disparities in purchase of services based on ethnicity/race throughout all 21 Regional Centers in California
 - iii. Each Regional Center's POS disparities impacts different ethnic groups
 - iv. Allocated funding for each RC to hire a Culture Diversity Specialist
 - e. Discuss identified unmet service needs within the GGRC Community
 - i. Unmet Needs Survey completed by GGRC case managers in 2019
 - f. Gather feedback from the GGRC community stakeholders
 - g. Reflect on current and developing projects
 - h. Update Purchase of Service (POS) data
 - i. Identify POS disparities- review differences in funding and use of POS funds based on race/ethnicity, language, age, and residence
- C. <u>Defining Disparity & Cultural Responsiveness</u>
 - a. <u>Disparity</u>: Any difference in the quality of services that is NOT due to differences in needs or preferences.
 - i. Discussion of Purchase of Service (POS) disparities in this Public Meeting at GGRC refers the differences in receiving and using services between people of white descent and other racial/ethnic groups.
 - b. <u>Cultural Responsiveness</u>: The ability to understand and provide services to people while taking into consideration their cultural and linguistic background.



- i. This discussion of challenges with POS disparity and service delivery addresses the challenges of individuals served and families with accessing services that truly meets their needs and supports their goals.
- c. <u>Equity</u>: the quality of being fair or impartial, in the context of this meeting providing services which meet community members where they are
 - i. Image used to illustrate the difference between Equality, Equity and the potential justice without the barriers that limit either.
- D. GGRC Demographics (see data charts in attached presentation for visual representation)
 - a. Introduction to the individuals served by GGRC
 - i. GGRC served 10,653 individuals
 - 1. This is 242 more individuals than in FY 19-20.
 - 2. The largest growth is seen in GGRC's Hispanic (+152) and Asian (+53 people) communities.
 - ii. The largest number of ethnicities served are White (3,187), Hispanic (2,613) and Asian (2,632)
 - Additionally, GGRC serves 1,343 people who identify as "other" ethnicity or multi-racial, 791 people who are Black/African American, and 81 people who are native Hawaiian/Other Pacific Islander, 6 individuals that identify as American Indian
 - iv. English, Spanish, and Cantonese are the languages represented by the greatest number of individuals
 - 1. There are 30 language categories in total represented by people served
- E. Frequently Used Terms
 - a. FY: Fiscal Year (July-June)
 - b. POS: Purchase of Service the authorization for a specific service to be provided by a specific service provider or company/agency
 - c. Per Capita: Per Person
 - d. Authorization: cost of services approved
 - e. Expenditures: cost of services that was paid for by the Regional Center
 - f. Utilization: Percentage of authorized services that have been used

F. Purchase of Service Data

- a. Purchase of Services Disparities or "POS Disparities" refers to differences in the amount of services approved and/or paid for from one ethnic group to another
- b. Purchase of service data shows rates of authorization, utilization, and expenditure is based on:
 - i. Age
 - ii. Race and ethnicity
 - iii. Language
 - iv. Type of developmental disability
 - v. Residence



- vi. No POS those who are eligible, but are not receiving POS funds
- c. Information POS Data Does Not Track:

(These are identities that are not currently tracked with data but may give insight on who is being underserved by current services)

- i. Gender identity
- ii. Sexual orientation
- iii. Diagnoses unrelated to qualifying factors
- iv. Income familial or individual
- v. Documentation status (Eligibility for regional center services is not impacted by income level or documentation status. While this is information that is not tracked by regional centers it is important to keep in mind that it affects someone's access, ie. fear and shame around accessing services)
- d. Purchase of Services (POS) does <u>NOT</u> include:
 - i. Services coordinated through a generic resource
 - ii. Medicare
 - iii. Medi-Cal
 - iv. Private insurance
 - v. Supplemental Security Income (SSI)
 - vi. School system
 - vii. Contracted Services
- e. What Does GGRC do with the Data?
 - i. Informs Home and Community Based Services (HCBS) and Service Access and Equity Projects
 - ii. Opportunity to educate service providers in the community
 - iii. Continued relationship building and collaboration with Community Based Organizations to build up generic resource partnerships
 - iv. Continue discussions across GGRC departments to inform cross agency work

G. Past Initiative

a. ¡Congresito Virtual! – virtual conference for Spanish-speaking families in Marin County

- i. Tech Access Pilot Program, 30 individuals received tablets through the tablet lottery.
- ii. Virtual Sessions Included:
 - 1. GGRC services
 - 2. Transition from Early Start to Ongoing Services
 - 3. Day Program Marin Ventures
 - 4. Community Living Casa Allegra
 - 5. Community Action Marin Intro to Services
 - 6. Intro to Speech Pathology



- iii. Outcomes: 7-9 attendees per session, positive comments and appreciation from attendees.
- H. <u>Review of Purchase of Service Data by Ethnicity</u>
 - i. Comparisons of authorizations, expenditures, and utilization by Ethnicity, Ages 0 and up see charts in presentation
 - ii. Comparison of authorized POS and expenditures for FY2019-2020 and FY2020-2021, Ages 0 and up – see charts in presentation; there has been in increase in authorizations and expenditures in FY2019-2020 compared to previous fiscal year.
 - iii. GGRC Purchase of Service identified disparities –ages 0 and older all services
 - POS data for ages 0 and older show a higher rate of authorization and expenditures for people who are white and Black/African American compared to all other ethnicities.
 - 2. People who are Hispanic have the lowest rates of Purchase of Service Authorizations and expenditures
 - 3. There has been an incremental decrease in POS authorization and expenditures in FY2020-2021 compared to FY2019-2020
 - a. Authorizations: Asian (\$22,785 vs. \$26,113); Hispanic/Latin(x) (17,069 vs. \$19,884); Black (\$43,428 vs. \$46,151); White (\$58,154 vs. \$59,369); Native Hawaiian (\$18,884 vs. \$24,850); American Indian or Alaskan Native (\$24,668 vs. 32,173); Multi-Cultural/Other (\$21,566 vs. \$59,369)
 - iv. Individuals served identified without a POS by ethnicity, Ages 0 and Up
 - 1. Hispanic (24.7%), Native Hawaiian (28.4%) and Multicultural/Other
 - (25.8%) have the highest percentages of folks served without a POS.
- I. <u>Pandemic Response:</u>
 - a. COVID-19
 - i. The POS Data does not account for the changes created by COVID-19
 - ii. Programming was adjusted due to pandemic
 - iii. Service Providers were permitted to bill for regular services
 - iv. Expenditures are not an exact representation of services provided
 - b. COVID POS Timeline
 - i. 3/2020-8/2020 providers billed average absence billing
 - ii. **9/2020 12/31/2020** the alternative services were introduced, and providers had surveys to complete, and they were billing average attendance
 - iii. Starting **1/1/21** DDS created alternative services rates that were monthly rates for non-residential programs other than transportation providers
 - iv. POS's can only have one or the other
 - v. 4/1/2021 transportation providers got their monthly rates
 - vi. 8/1/2021 transportation could have both alternative and traditional billings



J. Future Initiative

- a. Cultural Assessment
 - i. GGRC is partnering with Equity First Consulting to do a cultural analysis of the organization as a whole
 - ii. In order to address our service disparities, we are assessing the internal GGRC culture and looking at what may help to improve internal and external cultural responsiveness
 - iii. This assessment includes focus groups with GGRC
 - 1. Staff
 - 2. Leadership
 - 3. People served and their families
 - 4. Service providers

K. Discussion Questions:

- a. Discussion was broken into two sections throughout the presentation, allowing attendees to ask questions and respond to the information shared immediately instead of waiting until the end. Responses can be found in the "Public Meeting Comments and Suggestions."
- b. Discussion 1: Unmet Service Needs
 - i. How could difference (such as race, culture, gender, orientation etc.) create barriers to accessing services?
 - ii. What did you notice about the Equality, Equity, No Barriers image?
 - iii. When was a time you noticed GGRC was not culturally responsive? What do you think could be done differently?
- c. Discussion 2: Response to POS Data
 - i. What makes it hard to access services?
 - ii. Why do you think there are different utilization rates for different communities?
 - iii. If you could create any kind of services to meet your needs, what would you?
 - iv. What do you wish GGRC could do differently to make it easier to use services?
- L. PRAGNYA Presentation
 - a. We concluded the Public Meeting with a presentation from PRAGNYA, a communitybased organization that serves GGRC's catchment area. PRAGNYA received Service Access and Equity Funding from DDS to provide services, in part, to GGRC's catchment area. Kavita Sreedhar provided a summary of the services provided by PRAGNYA and the need to provide intentional community care to underrepresented immigrant communities.



6. Public Meeting Comments and Suggestions (including follow up by attendees after the meeting)

How could difference (such as race, culture, gender, orientation etc.) create barriers to accessing services?

- Some groups may be hesitant to engage in services due to history of oppression and misrepresentation. big barrier is understanding what the services are, what GGRC does,
- Different people have different access needs which can create challenges if a service does not meet the access needs (eg communication, technology, etc.)

What did you notice about the Equality, Equity, No Barriers image?

- Looking at Equality, Equity, and no barriers highlights that we don't have a one-sized fits all system, but the system is to bring services and supports to meet the needs and aspirations of each person, we won't be spending the same dollar amount of each person, but we need to make sure we don't have barriers to accessing services to meet someone's needs and aspirations
- With no barriers being a goal, we need to understand a person's goals and desired life (person-centered planning), then understand the barriers to that, and see where regional center services and service coordination can help someone more towards their goals and desired life.

When was a time you noticed GGRC was not culturally responsive? What do you think could be done differently?

A need for culturally relevant translation (not word for word translation) – takes a very long time to help families understand.

What makes it hard to access services?

- Lack of information or inability to understand available information on GGRC websites or other websites
- Often people want to see a menu or list of what they are eligible for they don't know what is possible
- Some services are not easy to understand (eg respite) as they are not services that were available in someone else's culture



More information about the available services to them and accessible information as far as procedurally what is available to them (eg additional services, change of services) – the information was more available to make people aware of what their options are

Why do you think there are different utilization rates for different communities?

- Lack of knowledge = lack of utilization services
- Cultural factors of denial, shame, guilt also play into the utilization of service rates among Asian and south Asian communities

If you could create any kind of services to meet your needs, what would you?

• Supported living services no matter where individuals live

What do you wish GGRC could do differently to make it easier to use services?

- Regular meetings/cohorts regarding supports for families and individuals to learn how to navigate and obtain support
- We should have more brochures with simple and plain language. Very simple so every family and individual can understand what is offered we as staff need to be more sensitive towards individuals and their families and help them navigate through the system. It's not their fault they have disabilities or speak differently. It's our job to make it as extremely person center as possible. We need to start looking and ask ourselves are we doing the best for the people that we serve putting ourselves and everyone's shoes. We can't just talk the talk we have to walk the walk.
- Allow the time that needs to be spent with each family.

Ways GGRC is using information provided from the public meeting discussion to guide future Service Access and Equity Efforts:

- Social workers carrying the "low to no POS caseload" will also serve as regional center service educators to families and individuals to help individuals served/family members understand region center services. Caseload response will be inclusive of newly eligible individuals.
- GGRC's proposed Language Access and Cultural Competency Plan (Pending DDS approval) includes (but is not limited to) the following:
 - Website redesign and translation for meaningful language access



- Engagement of individuals who receive services, and families, with diverse backgrounds and identities, to review and provide feedback on content
- Identification of additional translation companies with an understanding of Regional Center and social service terminology

7. Actions to improve Public Attendance and Participation

- a. As a result of the Covid-19 Pandemic, GGRC hosted two virtual public meetings using the Zoom Webinar platform on March 29th and March 31st, 2022. The event on the 29th took place from 10 AM-12PM while March 31st event was from 6 PM-8PM to accommodate different schedules. This virtual platform, which included call-in options, allowed attendees to participate in the meeting safely. This public meeting data was shared with community members by way of a self-advocate meeting and family support groups.
- b. Future efforts to increase attendance and participation may include but are not limited to:
 - i. Providing the public meeting presentation to more Family Resource Centers and other relevant community spaces.
 - ii. Facilitating this presentation more widely internally in addition to inviting staff

8. Attachments

- a. Public Meeting Flyer (available in Chinese and Spanish)
- b. PowerPoint Presentation (available in Chinese and Spanish)