



**SUPPORTS & SERVICES COMMITTEE
NOTES**

Date: May 20, 2024

Start Time: 5:30 PM

End Time: 7:00 PM

Location of This Meeting: Regional Center of the East Bay

- Virtual
- 500 Davis Street, San Leandro
- 1320 Willow Pass Road, Concord

ATTENDEES:

Staff Present: Lisa Kleinbub, Ronke Sodipo, Chris Hanson, Michael Minton, Steve Robinson,

Host: Frank Paré

Guests: Adam Hicks, Angeleter, Ann Pringle, Assata Olugbala, Deborah, Denise Bradley, Dominique, Gregory Holler, Cynthia Alonso, Justine Esomonu, Krystovia Marquez, Mia Wheeler, Marcie Lyn, Maria Ramirez, Noelle, Oakland Uptown Rotary, Tandra DeBose, Wendell James, Zackery Wheeler.

Spanish Interpreter: Giovanna Wormsbecker.

Note Taker: Cristal Jimenez-Hernandez

AGENDA:

I. Check-In

- Attendees shared their recent experiences with the regional center, highlighting the need for systemic change. Frank expressed the challenges he is facing with regional center services and the need for empathy and help. Maria and Assata, along with others, expressed support to Frank. Lisa and Ronke will follow up with Frank.
- Assata also requested an update on the Mason Tillman report, and Lisa mentioned she will share it as soon as it is available.

II. Corrective Action Plan [CAP] Presentation - Michael Minton.

License board and care homes.

- Michael explained the Quality Assurance Visit Process for regular licensed board and care homes, emphasizing the regional center's role in conducting annual announced and unannounced visits. There are around 400 licensed homes. Title 17 outlines that the regional center will conduct one announced visit, which is an annual QA (quality assurance), and two unannounced visits. The time spent per visit is between 2 to 4 hours. He added that the QA

team offers technical support when it comes to Special Incident Reports (SIRs), whistleblowers, and complaints.

- Michael clarified that while they offer technical assistance, they are not mandated by law to investigate abuse and neglect issues. These issues are the responsibility of other agencies such as Law Enforcement, Adult Protective Services, Children Protective Services, as well as other agencies.
- The Annual QA visit is scheduled with the Administrator of the home. Some of the QA team responsibilities are to review staff scheduled for compliance, employee files for health clearances, fingerprint clearance, trainings up-to-date, and strategies for aggression and redirections (level 4), and medication.
- The QA team also reviews the files of 20% of the people living at the licensed home. The information reviewed is to ensure the IPP is being implemented, current emergency information including names, addresses, emergency contact information, recent consumer photograph and physical description, allergy record, forms signed, medical visits, and other pertinent information.
- Michael explained the steps taken when issues are found, such as addressing immediate dangers and creating corrective action plans. He discussed substantial inadequacies that could trigger these plans, such as not following care plans or ensuring staff training. The QA does not leave the licensed home until issue is corrected.
- When a Corrective Action Plan is created, it is due to issues that do not pose an immediate danger, but are substantial inadequacies that need to be fixed.
- If the issues are not fixed, Title 17 allows the regional center to apply sanctions on the provider. An example could be not giving referrals until the licensed home fixes the issues described in the corrective action plan. There is also an appeal process when it comes to sanctions.

Specialized Homes

- Michael confirmed having approximately 70 specialized homes having a different regulation, but using the same corrective action plan. The regulation is that instead of reviewing the homes, it is to monitor how the agency is reviewing the homes. The agency is expected to go to the home monthly.
- Frank asked how this works when the clients do not have the ability to speak for themselves. Michael responded that family members are also involved, relying on their input when creating the report.

SLS, ILS, Day Programs

- These type of programs do not have any specific QA or corrective action plans regulated under Title 17. However, they would still use the same general process as other programs. Additionally, Michael mentioned new directives from DDS about CAPS for day programs and the possibility of future regulation of corrective action plans for these programs.

- Assata raised concerns about the lack of diversity considerations in the regulatory process, particularly regarding staff and clientele. In addition, she would like to know if the Case Managers are required to attend the IEP meetings. Per Michael, the case manager may attend any IEP meeting given that the parent invites them, and only intervenes when requested.
- Maria raised concerns and requested data to ensure equity, which Michael agreed to consider for future evaluations.
- Frank asked if the QA team keeps data of the homes that are permanently closed, and of homes that lack of referrals. Per Michael, we do not keep track of it.

III. Updates

a) Homeless RCEB Clients

- There is a majority of homeless of people of color, and the regional center will request to do additional outreach by getting together with other organizations. We will start getting proposals early June.
- Frank asked what about the mobile outreach. Per Lisa, there is no funding provided to do this project.

b) SLS/ILS Referral Process

- A program will be created for SLS/ILS creating a system to allow for expansion for other services. This system will allow to enter information regarding SLS/ILS in order to match with providers and connect with them. It will take around 60 days to implement this project.
- Frank asked how the provider information will be accurate. Per Lisa, this project is being built with some of the ideas given by the providers, so this is a good way to test the project in the hopes to get positive results. The reason for creating this project is for each individual served to have the opportunity to choose the provider.

IV. Next steps – Action Items / Person Responsible

- Lisa wants to ensure homeless population are aware and informed that RCEB exists.
- Krystovia would like to know what kind of collaboration RCEB has with the city of Oakland regarding homeless population. Per Lisa, we do have collaborations with the county office.

Meeting Ended