

**DEPARTMENT OF DEVELOPMENTAL SERVICES  
REGIONAL CENTER PURCHASE OF SERVICE PUBLIC MEETINGS SUMMARY, RECOMMENDATIONS  
AND PLAN TO PROMOTE EQUITY AND REDUCE DISPARITIES ANNUAL REPORT TEMPLATE**

As indicated in Welfare and Institutions (W&I) Code section 4519.5(g) and (i), regional centers are required to hold public meetings for community members within three months of posting annual purchase of service data on their websites. Regional centers submit an annual report to the Department of Developmental Services (Department) by May 31st. The Department reviews and provides feedback to the regional centers on the report, prior to its posting by August 31st. The following pages include the required components of the report. A list of questions is provided to assist regional centers when preparing the report in addition to the inclusion of regional center's public meeting notes, public comments, presentation materials and a plan with recommendations for increasing equitable access in purchase of services and supports.

**Regional center name:** **Golden Gate Regional Center**

**Person filling out report:** **Amanda Pyle**

**Date of completion:** **April 14, 2024**

**PROPER MEETING COMMUNITY INCLUSION**

W&I Code section 4519.5 (g)" ...each regional center shall meet with stakeholders (community members) in one or more public meetings regarding the (purchase of service) data... consider the language needs of the community and shall schedule the meetings at times and locations designed to result in a high turnout by the public and underserved communities."

1. **How many meetings did your regional center conduct?** **4**
  
2. **Did your regional center hold at least one meeting by March 31st?** **Yes**
  
3. **How were the meetings scheduled to accommodate community participation? Select all that apply.**
  - Webinar (e.g., GoToMeeting, YouTube)
  - Virtual platform (e.g., Zoom)
  - In-person
  - Hybrid
  - Other

**PROPER MEETING NOTIFICATION**

W&I Code section 4519.5(g) "...regional centers shall inform the department of the scheduling of those public meetings 30 days prior to the meeting. Notice of the meetings shall also be posted on the regional center's internet website 30 days prior to the meeting and shall be sent to individual stakeholders and groups representing underserved communities in a timely manner."

4. **Was the Department informed at least 30 days prior to ALL meetings?** **Yes**
  
5. **How was the Department informed?** **Liaison direct email**

**6. Were notices of ALL meetings held, posted on the regional center's website 30 days prior to each meeting(s)?** **No**

**GGRC Note:** 3 of 4 meetings were publicly posted 30+ days in advance. After the initial series of GGRC public meetings was completed, GGRC decided to add a 4th meeting to increase opportunities for attendance which provided less than 30 days notice for the additional public meeting.

**7. Select the best option that represents when individual community members impacted by disparities and barriers to equitable access to services and supports were informed? 30 days or more**

**8. What outreach efforts were utilized to inform individual community members impacted by disparities and barriers to equitable access to services and supports of the meeting(s)? Select all that apply.**

- Newsletter/Eblast
- POS meeting specific email
- Public meeting
- Social media
- Community partners
- Website (e.g., event page or calendar)
- Blog post
- Everbridge or another type of automated phone recording
- Mail
- Text
- Phone call by regional center staff
- Other

**CULTURALLY AND LINGUISTICALLY APPROPRIATE**

W&I Code section 4519.5(g) "The regional center shall provide participants of these meetings with the data and any associated information related to improvements in the provision of developmental services to underserved communities and shall conduct a discussion of the data and the associated information in a manner that is culturally and linguistically appropriate for that community, including providing alternative communication services."

**9. What languages were offered during the meeting(s)? Select all that apply.**

- English
- Spanish
- Mandarin
- Cantonese
- Hmong
- Korean
- Vietnamese
- ASL
- Other

**10. Did the meeting(s) include any of the following? Select all that apply.**

- Meeting(s) held in several languages
- Closed captioning provided

- Materials were provided in several languages
- Information was presented in plain language (i.e. easy to understand)
- Other

2 meetings had closed captioning through the zoom platform and 2 meetings had live transcriptions (CART) provided through Purple

**11. Describe how the cultural and linguistic needs of the communities were considered.**

The top threshold languages used by GGRC community members are Spanish and Cantonese. Those were the two languages selected for interpretation rooms as part of the public meetings. Flyers announcing the public meetings were made available in both Chinese and Spanish, as were the PowerPoint presentations for the meetings. In addition, ASL interpretation was provided during the meetings, and GGRC contracted with a CART provider to improve transcription accuracy. GGRC staff also collaborated with the Education and Orientation Unit to help inform community members of the meetings. Community members were offered additional languages upon request.

**ACTIONS TO IMPROVE PUBLIC ATTENDANCE AND PARTICIPATION**

W&I Code section 4519.5(i)(1)(A) "Actions the regional center took to improve public attendance and participation at stakeholder meetings, including, but not limited to, attendance and participation by underserved communities."

**12. Was the goal or purpose of the meeting communicated? If so, describe how?**

Yes, the purpose of the meeting was clearly stated in the announcements about the meeting beforehand and at the beginning of each meeting.

**13. What methods were used to provide an environment that allowed attendees to feel comfortable and interact with each other? Select all that apply.**

- Allowed for small group conversations
- Introduced staff in attendance
- Allowed attendees to introduce themselves
- Provided chat rooms (e.g., zoom chat function)
- Chat feature was enabled
- Opportunity for public comment
- Provided opportunities to ask questions
- Other

Attendees were provided the opportunity to give feedback, ask questions, etc. Through raise hand feature, chat, the zoom Q/A feature and the option of emailing info/feedback

**14. Based on attendance did you observe any of the following? Select all that apply.**

- Attendees engaged in public comment
- Innovative ideas suggested by attendees
- Diverse perspectives shared by attendees
- Attendees requested additional explanation/clarification on the information shared
- Other

15. Overall, how many individuals from the public attended the meeting(s)? Select best estimate.  
50-100

16. What efforts did the regional center take to improve public attendance and participation, including any new strategies? Select all that apply.

- Collaborated with community partners
- Offered focus groups
- Offered meetings in multiple languages
- Offered multiple meeting opportunities
- Outreach through group meetings
- Outreach via flyers/public service announcements/social media
- Provided translated materials
- Shared via Everbridge
- Offered meetings virtually
- Offered meetings during non-business hours or on weekends
- Not applicable
- Other

17. Who were the meeting(s) attendees? Select all that apply.

- Self-advocates
- Parents/family members
- Regional center staff
- Board members
- Community advocates
- Community based organizations
- Department staff
- Other

18. List the names of the partner agencies, community partners, and community-based organizations that participated in the meeting(s).

Disability Health Training Institute (DHTI), Stanford – ALAS Primes, Stanford – Project AFECT

### COPIES OF MINUTES AND ATTENDEE COMMENTS

W&I Code section 4519.5 (i)(1)(B) "Copies of minutes from the meeting and attendee comments"

19. Does the regional center report include a copy of the meeting minutes (notes) and a copy of the raw attendee comments? **Yes**

20. Which of the following themes reflect what attendees expressed as important, challenges and barriers faced? Select as top concern, concern or not a concern for each.

	Top Concern	Concern	Not a Concern
Regional center services satisfaction	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Case management satisfaction	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lack of regional center knowledge/service options	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of community trainings	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Concern with language and cultural competency	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service coordinator/staff training concerns	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Caseload concerns	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Communication/outreach concerns	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of regional center trust	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Unmet needs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Service accessibility concerns	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation issues	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rates and vendorization concerns	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor concerns	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lack of community, regional center, and other community member collaboration	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Need for advocacy training and support	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**21. Were there any additional topics or themes mentioned in the meeting(s) that are not listed in question 20? Please list and indicate if they were a top concern (mentioned by multiple people).**

None

**IDENTIFIED DISPARITIES IN POS DATA**

W&I Code section 4519.5 (i)(1)(C) "Whether the data...indicate a need to reduce disparities in the purchase of services among consumers in the regional center's catchment area."

**22. Did the regional center report data about number of instances when written copies of individual program plans (IPP) were provided at the request of consumers or their legal representatives more than 45 days for threshold languages and 60 days for non-threshold languages after request was made?**

No

**23. Summarize the type of disparities that were identified and discussed (e.g., by race/ethnicity, primary language, residence, age, diagnosis, etc.)**

Reviewed data about expenditure and authorization disparities across race/ethnicity (in total and by age), primary language groups as well as utilization rates. Also looked at changes in disparities over the past several years along with the differences in disparities based upon age groups and residence. (See meeting notes for more information.)

**REGIONAL CENTER'S RECOMMENDATIONS AND PLANS TO PROMOTE EQUITY AND REDUCE DISPARITIES**

W&I Code section 4519.5 (i)(1)(C) "...If the data do indicate that need, the regional center's recommendations and plan to promote equity, and reduce disparities, in the purchase of services."

**24. What other venues were utilized, in addition to holding the POS annual meetings, to gather information to develop the regional center's recommendations and plan<sup>1</sup> to promote equity and reduce disparities? Select all that apply.**

- Other regional center meetings
- Feedback requested from support groups
- Recommendations from focus groups
- Surveys
- Call for public input (e.g., social media, eblasts, website)
- Other

Conducting the annual New service needs survey that includes language access needs. Survey conducted through text, email, web and social meeting postings to people served, families, service providers, GGRC staff, community partners – received approximately 1,200 responses.

**25. Does the regional center's attached report include how the prior year's recommendations and plan were implemented? [Yes](#)**

**REPORTS POSTED ON INTERNET WEBSITES**

W&I Code section 4519.5 (c)(1)(B).

The Department posted final, de-identified Fiscal Year 2023/24 Annual POS reports on its website. Regional centers shall post a link on its internet website to the reports on the Department's webpage.

**26. Did the regional center post a link on its internet website to the reports on the Department's webpage? [Yes](#)**

**IDENTIFIED RESTORED SERVICES IN POS DATA**

W&I Code section 4519.5(a)(8) "the numbers, percentages, and total and per capita expenditure and authorization amounts, by age, as applicable, according to race or ethnicity and preferred language, for all combined residence types and for consumers living in the family home, regarding the following service types..."

**27. Did the regional center report data on the numbers, percentages and total and per capita expenditure and authorization amounts, by age, as applicable, according to race or ethnicity and preferred**

<sup>1</sup> Regional center to attach recommendations and plan.

**language, for all combined residence types and for individuals living in the family home, specific to the following service types:**

**Select all that apply:**

- Camping and associated travel expenses
- Social recreation activities
- Educational services
- Nonmedical therapies, including, but not limited to, specialized recreation, art, dance and music

## **FY2425 Update - GGRC Response to POS Disparity Reduction Suggestions**

*Suggestions and feedback in the POS Data Public Meeting held in 2024 focused on:*

- Efforts to increase service access and equity in the Hispanic/Spanish-speaking community
- Social Work caseload ratio concerns
- Availability of Self Determination

*Efforts to respond to those suggestions:*

- The Education and Orientation team has increased the number of bilingual Spanish-speaking social workers allowing the team to serve more people who have low to no purchases of service. POS data shows an increase in the related numbers of people with purchases of service in place.
- GGRC continues to hire more social workers and assess training and retention needs. GGRC leadership continues to advocate for regional center operations funding that better aligns with the cost of living in the SF Bay Area to assist with recruitment and retention of GGRC social workers and other staff.
- The Self Determination team has been able to increase their staff and host more information sessions including bilingual information sessions
- The Self Determination Program team has developed written information about the program in English and Spanish
- GGRC Board and Staff conducted focus groups in English, Spanish and Cantonese to learn more about needed supports for individuals served and families related to future planning for people living with aging caregivers
- GGRC's existing website had a language translation button installed to increase website accessibility
- Efforts to create a new GGRC website that is accessible across disabilities and languages, visually responsive, and in plain language with an easy to navigate platform are underway

## **Moving Forward in FY2526**

*GGRC has proposed use of Language Access and Cultural Competency Funds for FY2526 activities that include but are not limited to:*

- Roll out of new GGRC website (January-March 2026)
- Co-hosting 2<sup>nd</sup> Deaf Conference (September 2025)
- Updating pamphlets and brochures (English, Spanish, Cantonese)
  - Development of Self-Determination Program Brochure
- Work with the ARC of California to translate and implement their Future Family Planning curriculum in Cantonese
- Host Congresito or similar educational/outreach event for Spanish-speaking community

- Early Start Family and Vendor Resource Fair



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

## **FY 2023-2024 POS Data – Public Meetings**

- A. Introductions
- B. Language interpretation instructions
  - a. Only presenters and ASL interpreters will be sharing video
  - b. ASL interpreters will be spotlighted throughout the presentation, individuals can also pin interpreter videos in “speaker” view if preferred
  - c. Must have computer or tablet (iOS or android) with the zoom app
  - d. Click globe and select your preferred language
  - e. Mute original audio
- C. Agenda
  - a. There will be a couple of meeting options. March 12 is designed to spend a little more time on the POS data and March 13 is designed to be a bit more conversational.
  - b. All POS data for GGRC and all regional centers in the State are available on the DDS website at <https://www.dds.ca.gov/rc/purchase-of-service-data/>
- D. Equity and Equality
  - a. When it comes to service access and use within the developmental disability service system, there can often be a misperception that everyone should get the same
  - b. Equity: the quality of being fair or impartial, providing services which meet community members where they are and getting people what they need
  - c. We know we are not looking for everyone to have the exact same services and expenditures, but we are concerned about overall trends
- E. Terms
  - a. Authorized: cost of services approved
  - b. DDS: Department of Developmental Services
  - c. Expenditures: the amount spent on services by the Regional Center
  - d. FY: Fiscal Year (July 1 – June 30)
  - e. Per Capita: per person served
  - f. POS: Purchase of Service – the authorization for a specific service to be provided by a specific company
  - g. Utilization: percentage of authorized services that were used
  - h. Disparity: means a difference
- F. Purchase of Service Data



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

- a. A note on data analysis
    - i. POS data is presented as raw numbers – there is a lot of statistical analysis that can be done with various data analysis tools and techniques, but for the purposes of the public meetings we will be talking about raw data
    - ii. Data categories are based on census categories and may not be as specific or nuanced as possible
  - b. What does POS data track?
    - i. Purchase of service (POS) data show rates of authorization, utilization, and expenditure are based on:
      1. Age
      2. Race and ethnicity
      3. Type of developmental disability – diagnosis or qualifying condition
      4. Residence
      5. Language
      6. No POS – those who are eligible, but are not receiving POS funds
  - c. Changes in data reporting for FY 23-34
    - i. POS data for the following services:
      1. Social Recreational
      2. Educational
      3. Camping
      4. Non-medical Therapies
      5. IPP Translation Requests
    - ii. Some groups with small numbers of individuals have been deidentified in order to protect privacy
- G. GGRC Demographics (see data charts in attached presentation for visual representation)
- a. Introduction to the individuals served by GGRC
    - i. GGRC served 11,526 individuals
      1. This is 314 more individuals than in FY 22-23, a 2.8% increase
      2. This is important because it enables planning for appropriate numbers of social work staff, administrative staff and availability of services
    - ii. English, Spanish and Cantonese are the three most common preferred languages for individuals served
    - iii. Trends in diagnosis year over year can also help support development of appropriate services



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

#### iv. Summary of Demographic Data

1. The largest change in number of individuals served was in the Age 22+ category; however, the largest percentage change was in 0-2 year age range

#### H. Review of Purchase of Service Data – Authorizations vs. Expenditures (see data charts in attached presentation for visual representation)

- a. Per capita expenditures across all ages continue to show clear disparities with expenditures per capita for White individuals more than 3x higher than those for Hispanic individuals (\$84,700 vs. \$27,534, a difference of over \$57,000). This has been a persistent trend.
- b. The Other Race/ Ethnicity or Multi-Cultural community has the lowest utilization rate
- c. Overall, the disparities decrease considerably for younger age groups (0-2 and the school-aged group, 3-21)
- d. Individuals in the “In-Home” residence category maintain the highest total expenditures and authorized services but have the lowest per capita expenditures and services
- e. Individuals in the “CCF – Community Care Facility” residence category consistently have the highest per capita expenditures and authorized services
- f. We recognize that individuals living outside of the family home will often have more wrap-around services which helps explain the profound difference in per capita authorizations. We also see trends in family values tied to race or ethnicity that can prioritize multigenerational living in a family home. As a result, we need to continue to analyze data and further understand the motivations and the types of supports individuals need.

#### I. Review of Purchase of Service Data – No POS (see data charts in attached presentation for visual representation)

- a. GGRC has invested key resources in trying to determine specific reasons why individuals are not accessing services
- b. In the Hispanic population there were 697 individuals with no POS expenditures for FY 23-24, while in the Black/ African American population there were 161 individuals with no POS
- c. The percentage of individuals with no POS in the Asian and Black/ African American populations increased slightly in comparison to FY 22-23, while the percentage of individuals with no POS in the Hispanic and White populations decreased



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

- J. What does POS data not track?
  - a. The root causes of disparities and what is driving particular data points
  - b. Geographic information regarding where specifically people live or access services
  - c. Gender
  - d. Sexual orientation
  - e. Income
  - f. Other diagnoses unrelated to qualifying factors. The good thing about this is that as long as someone is eligible for regional center services based on a qualifying diagnosis, none of these other demographic characteristics can be used to determine services.
  - g. Services coordinated through a generic resource (regional centers are a payer of last resort, this can also be a contributing factor to differences in funded services):
    - i. Medicare
    - ii. Medi-Cal
    - iii. Private insurance
    - iv. Supplemental Security Income (SSI)
    - v. IEP-related services
    - vi. Contracted Services
  - h. Regional Center Case Management (as a service)
  
- K. Efforts to Improve Service Access and Equity
  - a. GGRC Efforts
    - i. All departments within GGRC continue to focus on increasing service access and equity
      - 1. Education and Orientation Unit – utilizing DDS Service Access and Equity Grant funding to specifically address Low and No POS.
      - 2. Continuing efforts to hire bilingual staff who can engage families in their preferred languages and increase translation of GGRC documents
      - 3. Implicit Bias Training – DDS facilitated a series of trainings for all regional centers including a mix of in-person and virtual sessions
  - b. Language Access and Cultural Competency Initiatives
    - i. GGRC has taken a deep and strategic approach to redesigning our website, including:
      - 1. Focus Groups



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

2. New logo and design feel for GGRC as an organization (community had the opportunity to vote on two final logo options with 400+ individuals served participating)
3. Community Advisory Committees
- ii. Rainbow Club
  1. A 6-month, twice a month get together for people who identify with the LGBTQIA community. It's a chance for people who we support to share about their own individual needs and build a sense of community that they may not experience otherwise.
  2. Looking beyond the 6-month trial to see how best to continue
- iii. 2024 Voting Education Events
  1. The GGRC Community Outreach Unit partnered with the State Council on Developmental Disabilities as well as some local reps from county voting offices to distribute information about how to vote and why voting is important
- iv. 2025 Deaf+ Conference in Partnership with Regional Center of the East Bay
  1. Conference specifically geared toward individuals in the deaf community, everything is offered either in ASL or with ASL interpretation and designed to engage those who receive regional center services who are deaf or hard of hearing
- c. DDS Initiatives
  - i. Standardized Individual Program Plan (S-IPP) to make sure the IPP is standardized across the state and built to incorporate some person-centered planning practices
    1. Everyone who received regional center services will slowly be transferred over starting in 2025
  - ii. Standardized Vendorization Packet
    1. DDS has been working with ARCA to develop a standardized vendorization packet for businesses interested in starting a new service. This is designed to ensure that all regional centers are following the same process for vendorization and help a broader range of service providers understand how to start a new service. One of the intended consequences is to engage more service providers for whom English is not a first language or are members of a historically underserved community.
  - iii. Funding Regional Center Implicit Bias Training
- d. Community Partners
  - i. Diversity in Health Training Institute (DHTI) – Joanne Lau



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

1. DHTI received funding from DDS Service Access Equity Grant to partner with GGRC and Regional Center of the East Bay (RCEB) to reach out to Asian families in the Bay Area
  2. Initiative is focused on two things:
    - a. Creating and multi-language video for GGRC and RCEB to share about regional center services
    - b. Hosting a series of multi-lingual workshops to reach out to people who are unfamiliar with regional centers (Cantonese, Mandarin, Vietnamese, Burmese and Tagalog)
  3. DHTI also works with immigrants to help train them as direct care professionals and connect them with agencies for employment opportunities, have also done a fast-track 10-hour respite training program
- ii. Stanford – ALAS PRIMES & Project AFECT
1. ALAS PRIMES is a partnership between ALAS and Stanford Medicine Department of Developmental Behavioral Pediatrics funded through a DDS Service Access Equity Grant. The partnership works to support families of children with educational and developmental care needs; one-on-one support to help navigate IEP meetings and connecting families to community resources. Help support GGRC with an onsite speech therapy clinic in their office. ALAS is based in Half Moon Bay and founded specifically to support the local farmworker community (Central American indigenous background) with a variety of programs.
  2. Project AFECT is a Stanford project (Autism Family Empowerment Coaching and Training) began in September of 2023, designed to support access to timely services and promote parent engagement. Work with children diagnosed with Autism in the Stanford Clinic – implement an approximately 6 month support program to help families evaluate and identify resources based on child’s diagnosis.

## **Public Meeting Questions and Public Comment**

### GGRC Discussion Questions

1. What areas have been most challenging for you to access GGRC services?



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

- *I hear quite often that people are frustrated with wait times, either for getting initial assessments or once eligible, getting connected with an ongoing social worker.*
2. Do you have any ideas for initiatives you would like to see us do to increase access to services?

- *I work at Support for Families as the Education Director there. We have an Access and Equity grant to develop family connectors from different language groups and currently in the process of recruiting people. This program will be focused on transition services. Finding people who really understand the barriers and challenges people face is very difficult. I'll be happy to report back as we make progress.*
- *I just want to echo everything others have said. I'm a parent, on the local SDP advisory committee, person-centered planner and independent facilitator. It's interesting to hear the various perspectives here. Within the SDLAC we have a subcommittee that is trying to collaborate across three different regional centers while also trying to come up with ideas. I feel like there is often a lack of understanding of many of the efforts already in place. I'm curious how we can bring together some of these different efforts in a coordinated way. As previously mentioned, some individuals and families express frustration with wait times and confusion depending on who is actually sitting in meetings. Someone may represent a certain demographic speaking on behalf of others who we are also trying to help and support but not clearly understand. I want to help these conversations and better use our resources in alignment and partnership so that we can actually help the regional center support those self determination efforts.*

⇒ To clarify, you're referring to the Self Determination Local Advisory Committee meetings, correct? Lisa, maybe you and I can brainstorm about this a little bit. In our system is the Golden Rule, "nothing about me, without me". While that's often looked at from the self-advocate perspective it also applies to our demographics conversation. How are we to know what the Hispanic community needs as far as information on self determination, understanding that service, support to access that service, etc. if we're not asking that community, just as an example. One of the things we can really change is more question asking – who should we partner on outreach to this particular community or for that particular program? That way, GGRC can help guide some of those partnerships in-house as well. I think that's



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

something that Lisa and I can chat more about – how we can support the committee to ask those questions so that we get people linked with the right people internally.

- *Being a coach from Project AFECT has given me the opportunity to see how important it is for families to have someone who can guide them and educate them. Most of the families we serve are Spanish-speaking, so we have seen that it's very important to have a language connection or a cultural connection. We notice this especially when we have some families who speak other languages, and at Stanford we have the opportunity to have translators. However, the message we've heard is that it is very hard to understand, possibly things aren't being translated well but it can also be that medical terms are very difficult and it's hard to connect through a translator. Also, families who are immigrants are often very unfamiliar with how the system works, and telling them that the regional center exists is completely unknown to them.*

⇒ One of the things that you bring to mind for me is the challenge we have not only in finding translation and interpreter agencies to help with language access, but finding people who can provide accurate translation and interpretation. Many times interpreters are not familiar with our service delivery system and it's one of the reasons we decided not to offer Cantonese for one of our meetings, because we couldn't guarantee we had a Cantonese interpreter who knew our disability specific language and service delivery system. And we didn't want to have information being conveyed that was inaccurate. We are definitely open to ideas of how we can strengthen the accuracy of services when we can't meet someone's need from a first person perspective.

- *More support and resources for deaf individuals would be great.*

⇒ Thank you so much. I will highlight that we had a new deaf access specialist who started with us in the fall and this is one of the areas she is looking for. Please feel free to give us feedback if you know if specific resources you or others in the deaf community are having difficulty accessing or that can help direct our focus.

3. Is there other feedback you would like to provide related to service access?

- *I'm curious and thrilled to hear about the tutoring service. Is this available to all GGRC clients who qualify for Lanterman services? Does GGRC provide*



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

*payment for tutoring that a family finds or are these vendored tutoring programs?*

- ⇒ We have a vendored tutoring agency called Tutor Me and they are available to start serving children at age six. Their main office is in San Mateo county but will provide service in all three GGRC catchment area counties.

*Data question – is there data that shows how many individuals live at home vs. in a community care facility by race/ ethnicity?*

- ⇒ Yes, this specific data is in the overall spreadsheet data posted on the GGRC and DDS websites. The tabs are labeled “Total Annual Expenditures and Authorized Services by Race/Ethnicity by Residence”.

*Data question - is there data that further breaks down the Multi-Cultural category? Multi-Cultural could include families with two different cultures who are both Spanish-speaking for example.*

- ⇒ Unfortunately, there broad demographic categories do not have any more specificity. There are some more specific data points regarding individuals that are not publicly available, but within the POS Data Reports, this is the best we can do. The GGRC social work team has made it a priority to capture information in individual files about languages spoken at home and by individuals served, not only primary languages but any others as well, in an effort to help complement the general language data that we have. We also encourage service providers to implement person-centered practiced to look at the various cultural and identity values of individuals served.

*Data comment – thank you so much and really appreciate the session. I love the way you walked through these categories. I was taking a look and comparing the No POS data by language and ethnicity for GGRC with stage averages and noticed that we’re particularly struggling with the 0-2 age range having high numbers of No POS across all groups. I was hoping we could touch on that at some point. Thank you.*

- ⇒ I can address that now. That is something about which we are aware. Our Director, Brenda Gonzalez, whose department covers Early Start has been focusing significant time with her team on how to make improvements. Some of that is coming from internal restructuring, continued hiring efforts to ensure we have appropriate numbers of staff, and we have several requests for proposals out looking for more Early Start providers with a specific criterion to serve a wider range



# Golden Gate Regional Center

*Supporting Lives of Liberty and Opportunity*

of geographic areas. We've run into some problems with existing providers who don't want to serve particular parts of the city where parking is a problem or harder to reach areas like the coastside. Our hope is that with those continued efforts we will see some change in the right direction.

*Data comment – I just had one other kudos actually. When looking at GGRC's annual total expenditures and authorized services for camping, GGRC has higher utilization rates and authorization rates in most categories than the statewide averages, so bravo to GGRC for that; for developing those relationships and access to those services.*

⇒ Thank you for pointing that out. We've had a large number of self-advocates in our area who have been asking for restoration of those funds, and it's great to see those advocacy efforts paying off – not only people saying that they wanted those services restored but also following up and using those services.

*Data question – what is the expected impact on POS data with the removal of remote services?*

⇒ Right now, it is very difficult to tell because POS data does not easily track who is receiving services remotely vs. in person. Should things go through with the removal of remote services, I would expect to see a drop in utilization across almost all categories just because of the services that are accessible.

*Data question – you mentioned adding educational services and non-medical therapies for FY 23-24, can you give an example of each?*

⇒ Yes, as an example of educational, we have some new one-to-one tutoring services for individuals who can't find something through generic resources. Non-medical therapies would be art therapy, music therapy, massage therapy, etc.

- End of Document -

# **PURCHASE OF SERVICE DEMOGRAPHICS 2025 PUBLIC MEETING**

Join GGRC for a presentation on expanding service access! We'll share insights from Fiscal Year (FY) 2023-2024 Purchase of Service (POS) data and discuss efforts to improve equity in regional center services. This is also a chance to share your ideas on making services more inclusive and accessible.

## **Wednesday**

March 12, 2025

**10:00 AM - 12:00 PM**

To register [CLICK HERE](#)

Wednesday's session is a deep review of FY 2023-2024 Purchase of Service data and GGRC's response. Ideal for those interested in a data-focused discussion.

## **Thursday**

March 13, 2025

**12:30 - 2:00 PM**

To register [CLICK HERE](#)

or

**7:00 - 8:30 PM**

To register [CLICK HERE](#)

Both of Thursday's sessions summarizes current Purchase of service data and GGRC's response. Ideal for those interested in a discussion based meeting.

**Spanish, Cantonese, and  
ASL interpretation will  
be provided!**

We will do our best to provide other language options as requested.

To book additional languages, please contact Aria Alokozai before Feb. 26th.

**aalokozai@ggrc.org**

**415-546-9222**



Purchase of Service data is available to view, for more information visit DDS's website:

<https://www.dds.ca.gov/rc/disparities/data/purchase-of-service-annual-reports/>

or GGRC's website:

<https://www.ggrc.org/about-us/transparency-accountability#Reporting>





**Golden Gate Regional Center**

## 2023-2024 Purchase of Service Data Public Meeting

*Wednesday, March 12, 2025 10:00am*

## Reunión Pública sobre Datos de la Compra de Servicios 2023-2024

*Miércoles, 12 marzo 2025 a 10:00am*

## 2023-2024 服务采购数据公开会议

*Wednesday, March 12, 2025 10:00am*

# ASL Interpretation Instructions

Only the presenters and ASL interpreters will be sharing video. ASL interpreters will be spotlighted.

Participants who require ASL interpretation should pin the ASL interpreter's video in the live session to view the interpreter larger. To do this:

1. Make sure you are in speaker view (one large video feed with smaller video feeds above it, this should be the layout by default). If not in speaker view, click **"Speaker View"** icon (picture).
2. Right-click on interpreter's video and select **"Pin Video."**

## ASL 手语翻译说明

1. 與會者如需要美國手語翻譯，在會議過程中應釘選美國手語譯員的視訊，以檢視更大的譯員視訊。釘選方法：
2. 確保您處於發言者視圖（有一個大視訊，上方是較小的視訊畫面；這應該是默認配置）。如不處於發言者視圖，請按一下「Speaker View」圖示（圖片）。
3. 以滑鼠右鍵按一下譯員的視訊，選擇「Pin Video」

## Instrucciones para ver la interpretación en A.S.L.

1. Los participantes que requieran interpretación a ASL deberán destacar el video del intérprete de ASL en la sesión en vivo para poder verlo en primer plano. Para hacer esto:
2. Asegúrese de estar en la modalidad de Speaker View (Ver al orador activo), es decir, una señal de video grande con señales de video más pequeñas por encima de ella; esta debe ser la configuración predeterminada. Si no está en la modalidad de Speaker View, haga clic en el ícono de "Speaker View", cuyo símbolo figura en la imagen inferior.
3. Haga clic con el lado derecho en el video del intérprete y seleccione "Pin Video" (Destacar video).

# Language Interpretation Instructions

## 语言翻译说明

1. 要收聽西班牙文或廣東話翻譯，您必須使用電腦連線至網站 [zoom.us](https://zoom.us)，或使用裝有Zoom應用程式的平板、iOS 電話或 Android 電話。僅電話接入者無法收聽翻譯。
2. 看到「English/ Spanish/ Cantonese Interpretation Available」後，按一下地球圖示。
3. 選擇您需要的語言。
4. 按一下「Mute Original Audio」（關閉原始音訊），可關閉英文版。

## Instrucciones para escuchar la interpretación

1. Para oír la interpretación al español o cantonés es necesario conectarse a [zoom.us](https://zoom.us) por computadora o mediante una tableta, iOS o Android con la aplicación de Zoom. No se podrá oír la interpretación solo por teléfono.
2. Haga clic en el ícono del globo terráqueo cuando se indique "English/ Spanish/ Cantonese Interpretation Available" ("Interpretación disponible de inglés a español y cantonés").
3. Seleccione "Spanish" o "Español".
4. Podrá silenciar la versión en inglés haciendo clic en "Mute Original Audio" ("Silenciar audio original") aquí.

1. To hear the Spanish or Cantonese translation, you must connect on a computer to [zoom.us](https://zoom.us), or a tablet, iOS, or Android with the Zoom App. You will not be able to hear the translation by telephone alone.
2. Click on the globe icon when prompted with "English/ Spanish/ Cantonese Interpretation Available."
3. Select your preferred language.
4. You can mute the English version by clicking "Mute Original Audio" here.

# Agenda

- Introduction
- Equity and Equality
- Frequently Used Terms
- Purchase of Service Data
- GGRC Initiatives
- DDS Initiatives
- Community Partner Initiatives
- Public Comment

# 议程

- 介绍
- 公平与平等
- 常用术语
- 购买服务数据
- GGRC 倡议
- DDS 计划
- 社区合作伙伴倡议
- 公众意见

# Agenda

- Introducción
- Equidad e Igualdad
- Términos de Uso Frecuente
- Datos sobre la Compra de Servicios
- Iniciativas de GGRC
- Iniciativas del DDS
- Iniciativas de Socios Comunitarios
- Comentarios del Público

Introduction

介绍

Introducción

# Equity/Equality

**平等：**每个人都得到相同的 - 无论他们是否需要还是适合他们

**公平：**每个人都能得到他们需要的东西 - 了解障碍、环境和条件

**Igualdad:** Toda persona recibe lo mismo, sin importar si es lo que necesita o le conviene.

**Equidad:** Toda persona recibe lo que necesita, teniendo en cuenta las barreras, circunstancias y condiciones.

**EQUALITY:**  
Everyone gets the same – regardless if it’s needed or right for them.



**EQUITY:**  
Everyone gets what they need – understanding the barriers, circumstances, and conditions.



Copyright 2022 Robert Wood Johnson Foundation



Terms	术语	Términos
<ul style="list-style-type: none"><li>• Authorized –cost of services authorized</li><li>• DDS – Department of Developmental Services</li><li>• Expenditures – amount spent on services</li><li>• FY – Fiscal Year</li><li>• Per capita – per person served</li><li>• POS – Purchase of Service</li><li>• Utilized – percentage of authorized services that were used</li></ul>	<ul style="list-style-type: none"><li>• Authorized – 授权的服务成本</li><li>• DDS – 发展服务部</li><li>• 支出 – 服务支出金额</li><li>• FY – 财政年度</li><li>• 人均 – 每人服务</li><li>• POS – 购买服务</li><li>• 已使用– 已使用的授权服务的百分比</li></ul>	<ul style="list-style-type: none"><li>• Autorizado: costo de los servicios autorizados</li><li>• DDS: Departamento de Servicios de Desarrollo</li><li>• Gastos: cantidad gastada en los servicios</li><li>• FY: Año Fiscal</li><li>• Per cápita: por persona atendida</li><li>• POS: Compra de Servicios</li><li>• Utilizado: porcentaje de servicios autorizados que se usaron</li></ul>

## Purchase of Service Data

*(Graphs will be made available in Spanish and Chinese.)*

## 购买服务数据

*(我们将提供西班牙文和中文的图表。)*

## Datos sobre la Compra de Servicios

*(Los Cuadros Informativos estarán disponibles en español y chino)*



## A note on data analysis

- Non weighted vs Weighted per capita
- Categories
- Raw Numbers vs Nuanced Analysis
- All our data current and historical available on [DDS.GOV](https://DDS.GOV) or [GGRC.ORG](https://GGRC.ORG)

## 数据分析说明

- 非加权人均与加权人均
- 类别
- 原始数字与细微分析
- 我们所有当前和历史数据均可在 [DDS.GOV](https://DDS.GOV) 或 [GGRC.ORG](https://GGRC.ORG) 上查阅

## Nota sobre el análisis de los datos

- No ponderado vs. Ponderado per cápita
- Categorías
- Números brutos vs. Análisis matizado
- Todos nuestros datos actuales e históricos están disponibles en [DDS.GOV](https://DDS.GOV) o [GGRC.ORG](https://GGRC.ORG)

---

## What does the POS Data track?

- Age
- Ethnicity
- Race
- Diagnosis or Qualifying condition
- Residence
- Language
- No POS No Purchase of Service

## POS 数据追踪什么？

- 年龄
- 种族
- 人种
- 诊断或符合条件的条件
- 居住地
- 语言
- 没有 POS 没有购买服务

## ¿A qué le hacen seguimiento los datos del POS?

- Edad
- Etnia
- Raza
- Diagnóstico o Condición que le hace elegible
- Residencia
- Idioma
- Sin POS (Sin Compra de Servicios)

## POS Data Points FY 22-23 Vs. 23-24

- Social Recreational
- Educational
- Camping
- Non-Medical Therapies
- IPP Translation Requests
- Deidentification of groups
- Small Counts Suppression
- Complementary Cell Suppression

## POS 数据点 FY 22-23 Vs. 23-24

- 社交 娱乐
- 教育
- 露营
- 非药物治疗
- IPP 翻译请求
- 群体去标识化
- 小数据抑制
- 互补单元抑制

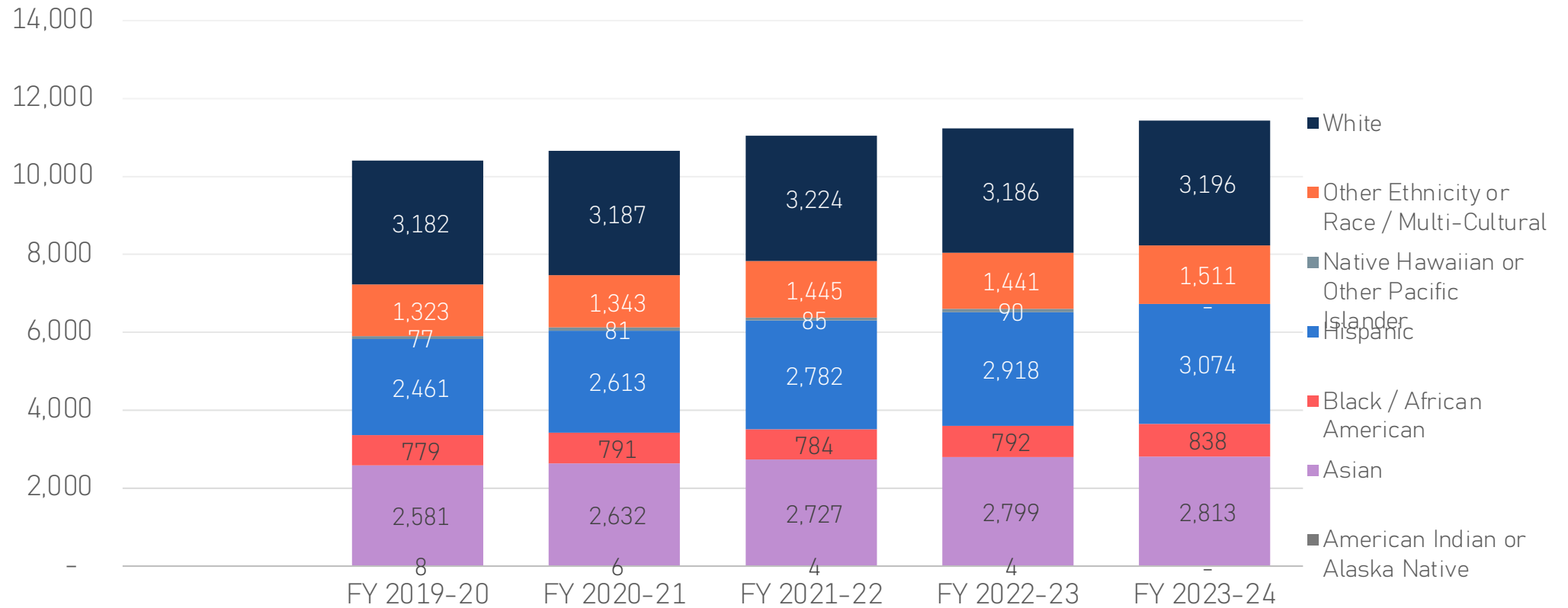
## Datos de POS para los Años Fiscales 22-23

- Recreación Social
- Educativo
- Campamento
- Terapias No Médicas
- Solicitudes de Traducción de IPP
- No identifica grupos basándose en población
- Supresión de cantidades muy bajas (para estadísticas)
- Supresión de Celdas Complementarias

# GGRC Demographics FY 2019-2024

## GGRC 人口统计 FY 2019-2024

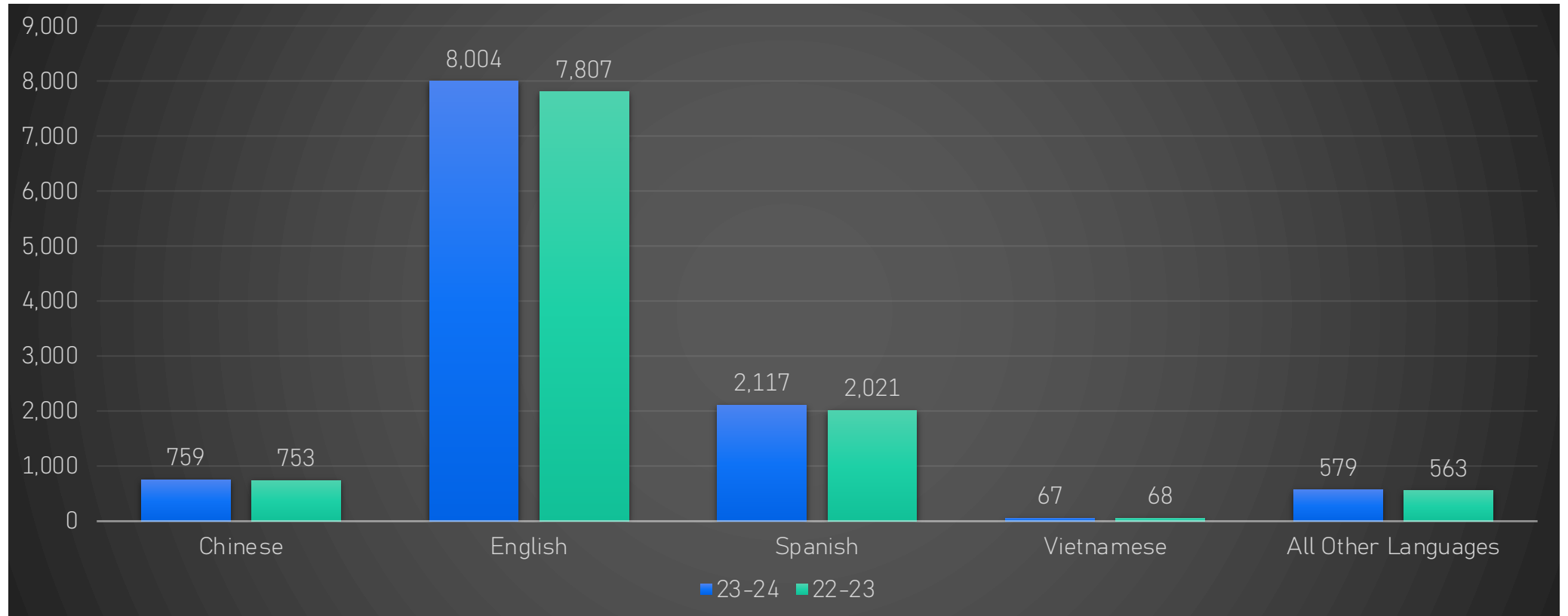
### Datos Demográficos de GGRC Año Fiscal 2019-2024



# Languages for FY 22-24

## 使用的语言 FY 22-24

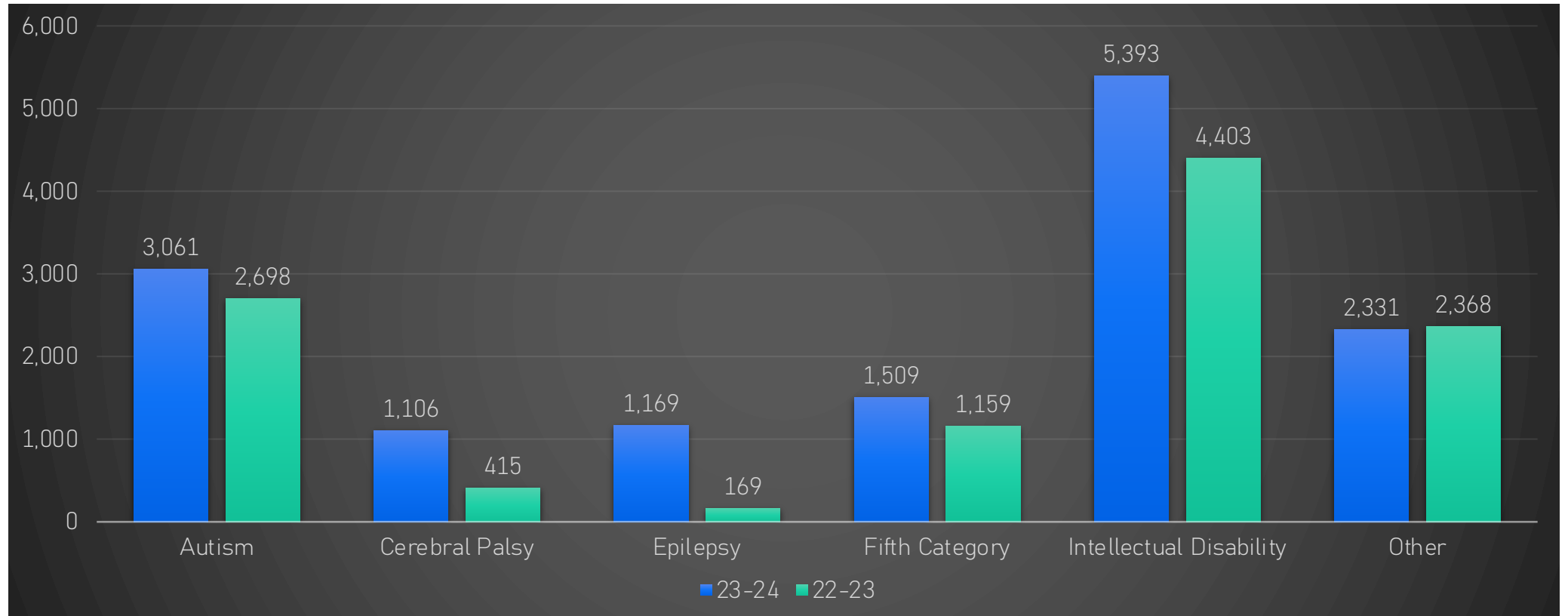
### Idiomas para los Años Fiscales 22-24



# Diagnosis for FY 22-24

## 诊断数据 FY 22-24

### Diagnósticos para los Años Fiscales 22-24



# Demographic Data Points Highlights

## 人口统计数据点亮点

### Datos Demográficos que Resaltar

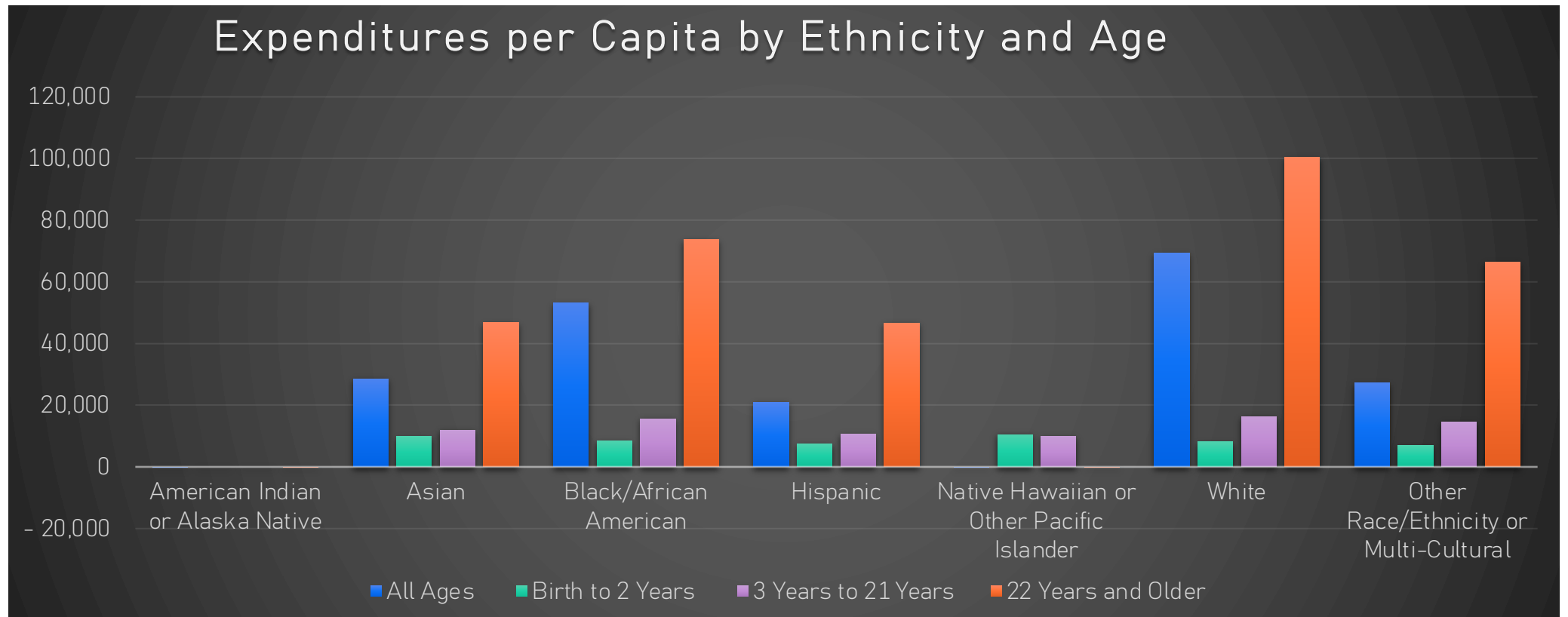
Category	Number Change	Percentage Change
Age 0-2Y	+122	+6.7%
Age 3-21Y	+41	+1.0%
Age 22+	+151	+2.9%
Spanish	+96	+4.7%
English	+197	+2.5%
Chinese	+6	+0.8%
Vietnamese	-1	-1.47%
All Other Languages	+16	+2.8%

Category	Number Change	Percentage Change
Autism	+363	+13.45%
Intellectual Disability	+128	+2.43%
Cerebral Palsy	-20	-1.78%
Epilepsy	-12	-1.02%
Category 5	+5	+0.33%
Other	-37	-1.56%

# Expenditures per Capita by Ethnicity and Age FY 23-24

## 按种族和年龄划分的人均支出 FY 23-24

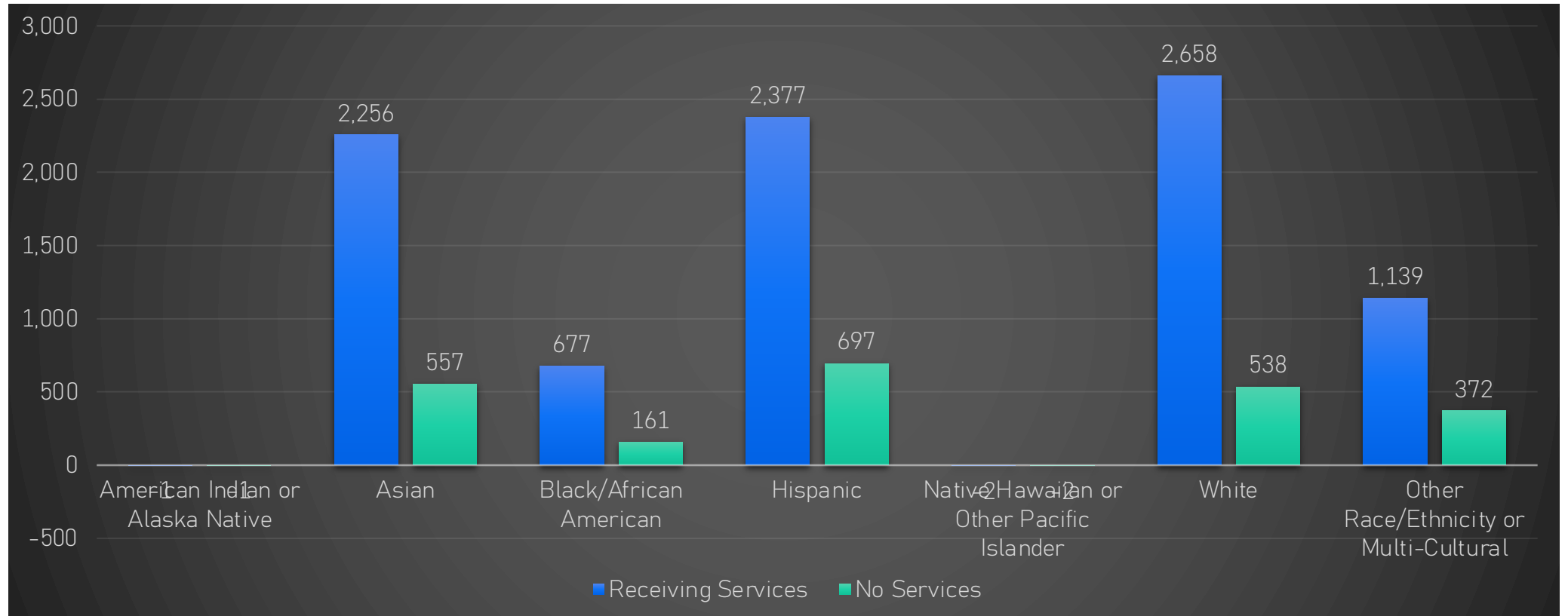
### Gastos per Cápita por Etnia y Edad para el Año Fiscal 23-24



No POS - Ethnicity/Race FY 23-24

没有 POS - 按种族分类 FY 23-24

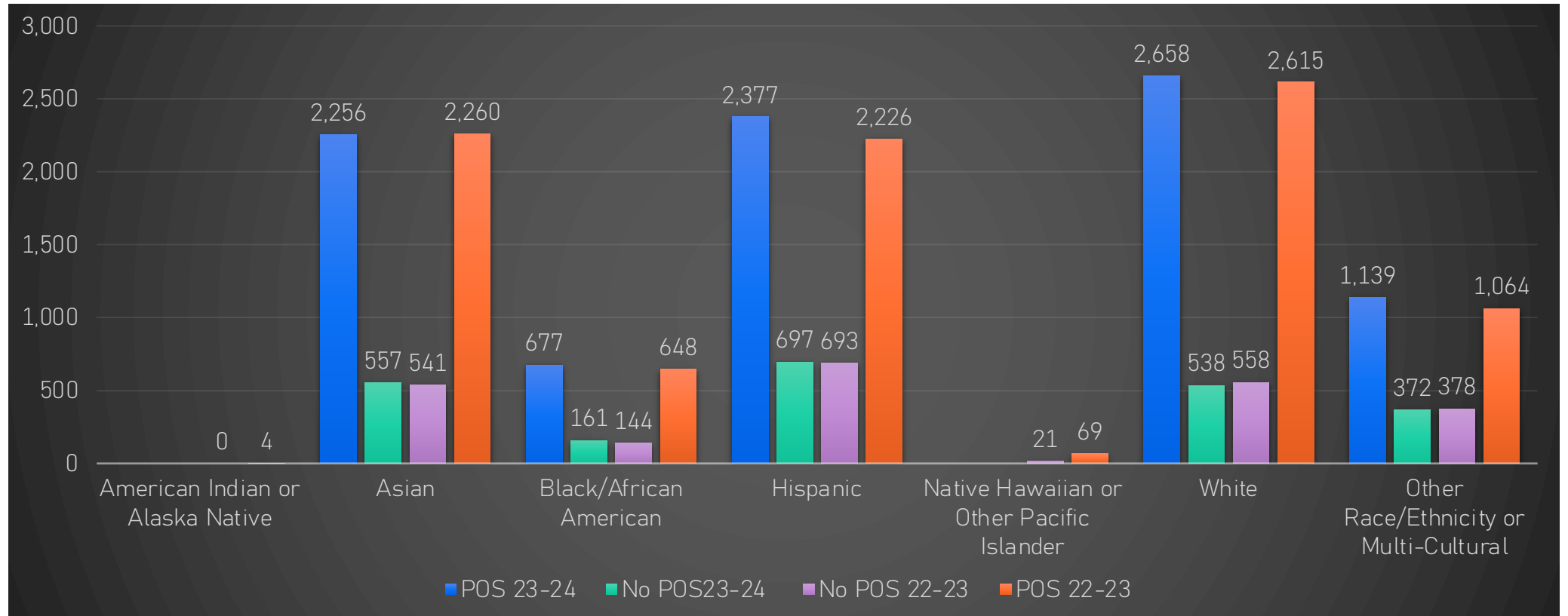
No POS: Etnia/Raza para el Año Fiscal 23-24



# No POS Ethnicity/Race FY 22-24

## No POS 按种族分类 FY 22-24

### No POS: Etnia/Raza para Años Fiscales 22-24



## Purchase of Service Disparities Insights

1. Hispanic category has the greatest per capita POS disparities among all groups
  - Highest vs Lowest POS Per Capita Hispanic \$27,534 Vs. White \$84,70 Difference of \$57,000
2. Other Race/Ethnicity or Multi-Cultural has the lowest utilization rate.

## 购买服务差异的解读

1. 西班牙裔在所有群体中人均 POS 差异最大
  - POS 人均支出最高与最低 西班牙裔 27,534 美元 vs. 白人 84,70 美元 相差 57,000 美元
2. 其他种族/民族或多元文化的利用率最低。人均 POS

## Temas Clave en las Disparidades para la Compra de Servicios

1. La categoría "Hispanic" tiene las mayores disparidades per cápita en POS (Compra de Servicios) entre todos los grupos.
  - La diferencia entre el POS per cápita más alto y el más bajo es significativa: "Hispanic" \$27,534 vs. "White" \$84,700. Una diferencia de \$57,000.
2. La categoría "Otra Raza/Etnia o Multi-Cultural" tiene la tasa de utilización más baja.

## Purchase of Service Disparities Insights

1. Individuals in the Hispanic category consistently have the lowest per capita expenditures and authorized services across all age groups and diagnoses.
2. Individuals in the In-Home residence category maintain the highest total expenditures and authorized services but have the lowest per capita expenditures and services.
3. Individuals in the CCF: Community Care Facility residence category consistently have the highest per capita expenditures and authorized services.

## 购买服务差异的解读

1. 西班牙裔类别的个人在所有年龄组和诊断中始终拥有最低的人均支出和授权服务。
2. 居家住所类别的个人保持最高的总支出和授权服务，但人均支出和服务最低。
3. CCF类别的个人：社区护理机构住所类别的个人始终拥有最高的人均支出和授权服务

## Temas Clave en las Disparidades para la Compra de Servicios

1. Las personas en la categoría "Hispanic" tienen, consistentemente, los gastos per cápita y servicios autorizados más bajos en todos los grupos de edad y diagnósticos.
2. Las personas en la categoría de residencia "En el Hogar" mantienen los gastos totales y servicios autorizados más altos, pero tienen los gastos y servicios per cápita más bajos.
3. Las personas en la categoría de residencia "CCF: Centro de Cuidado Comunitario" tienen, consistentemente, los gastos per cápita y servicios autorizados más altos.

## POS Data Does Not Track...

- Root Causes
- Geographic base information
- Gender
- Sexual orientation
- Income
- Diagnose unrelated to qualifying factors
- \*\* Regional Center Eligibility does not take into considerations the above factors.

## POS 数据没有追踪...

- 根本原因
- 缺乏地理基础信息
- 性别
- 性取向
- 收入
- 与资格因素无关的诊断
- \*\* 区域中心资格不考虑上述因素。

## Los datos de POS no se fijan en...

- Causas Raíz
- Falta de información geográfica base
- No identifica género
- Orientación sexual
- Ingresos
- Diagnósticos o condiciones no relacionados con factores de elegibilidad
- \*\*La elegibilidad para el Centro Regional no toma en consideración los factores anteriores.



## POS Data Does Not Track...

- Services coordinated through a generic resource
- Medicare
- Medi-Cal
- Private insurance
- Supplemental Security Income (SSI)
- IEP related services
- Contracted Services
- Case Management (as a service)

## POS 数据没有追踪...

- 通过通用资源协调的服务
- Medicare
- Medi-Cal
- 私人保险
- 补充保障收入 (SSI)
- IEP 相关服务
- 合同服务 案例管理 (作为一项服务)

## Los datos de POS no se fijan en...

- Servicios coordinados por medio de un recurso genérico
- Medicare
- Medi-Cal
- Seguro Privado
- Seguridad de Ingreso Suplementario (SSI)
- Servicios relacionados al IEP
- Servicios Contratados
- Administración de Casos (como un servicio)

Questions or thoughts on the data?

对数据有疑问或想法吗？

¿Alguna pregunta o ideas sobre los datos?

Efforts to Improve  
Service Access & Equity

努力改善服务的可获取性和公平性

Esfuerzos para Mejorar el  
Acceso a los Servicios y la Equidad

## GGRC Efforts

Departments across GGRC continue to focus on ways to increase service access and equity within the GGRC community.

## GGRC 的努力

GGRC 各部门继续致力于提高 GGRC 社区内服务可及性和公平性。

## Esfuerzos del GGRC

Los departamentos en todo el GGRC siguen centrándose en formas de aumentar el acceso a los servicios y la equidad dentro de la comunidad del GGRC.



Education and Orientation Unit

教育及导向组

Unidad de Educación y Orientación



Bilingual Staff and Document Translations

双语员工和文件翻译

Personal Bilingüe y Traducción de Documentos



Implicit Bias Training

隐性偏见培训

Capacitación sobre los Prejuicios Implícitos

# Language Access and Cultural Competency Initiatives

## 语言可获取性和文化了解性

### Acceso Lingüístico e Iniciativas sobre la Capacitación / Aptitud Cultural

1. GGRC New Website Development
  - Focus Groups
  - Logo and Design
  - Community Advisory Committee
2. Rainbow Club
3. 2024 Voting Education Events
4. 2025 Deaf+ Conference Partnership with Regional Center of the East Bay

1. GGRC 新网站开发
  - 焦点小组
  - 徽标和设计
  - 社区咨询委员会
2. 彩虹俱乐部
3. 2024年投票教育活动
4. 2025年听障人士+会议 与东湾区域中心合作

1. Desarrollo del nuevo sitio web del GGRC
  - Grupos de Investigación
  - Logotipo y Diseño
  - Comité Consultivo Comunitario
2. Rainbow Club
3. Eventos de Educación para Votar 2024
4. Conferencia en Asociación con Personas Sordas+ con el Centro Regional de East Bay

*"Sordas+" se refiere a personas sordas y con otros trastornos auditivos*

## DDS Initiatives

The Department of Developmental Services is working on many initiatives that directly and indirectly are addressing or will address issues associated with Purchase of Service differences in the regional center system.

## DDS 举措

发展服务部正在开展多项计划，直接或间接地解决或将解决与区域中心系统中的服务购买差异相关的问题。

## Iniciativas del DDS

El Departamento de Servicios de Desarrollo está trabajando en varias iniciativas que, directa e indirectamente, se enfocan o enfocarán en temas relacionados a las diferencias en la Compra de Servicios en el sistema de centros regionales.



Standardized Individual Program Plan (S-IPP)

标准化个人计划 (S-IPP)

Plan de Programa Individual Estandarizado (S-IPP)



Standardized Vendorization Packet

标准化供应商文件包

Paquete Estandarizado de Proveedores



Funding Regional Center Implicit Bias Training

资助区域中心隐性偏见培训

Financiar la Capacitación sobre Prejuicios Implícitos en el Centro Regional

---

## Community Partners

- Diversity in Health Training Institute (DHTI)
- Stanford – ALAS Primes & Project AFECT

## 社区合作伙伴

- 健康多元化培训学院 (DHTI)
- 斯坦福 – ALAS Primes 和 Project AFECT

## Socios de la Comunidad

- Instituto de Entrenamiento Para la Diversidad en la Salud (DHTI)
- Stanford – ALAS Primes & Project AFECT

# Public Comment & Discussion

## 公众评论与讨论

## Comentarios del público y Debate

1. What areas have been most challenging for you to access GGRC services?
2. Do you have ideas for initiatives you would like to see do to increase access to services?
3. Is there other feedback you would like to provide related to service access?

1. 对你而言哪些领域获取 GGRC 服务最具挑战性？
2. 您是否有想法采取哪些举措来增加服务获取量？
3. 您是否还想提供与服务获取相关的其他意见？

1. ¿Qué áreas te han resultado más difíciles para recibir los servicios del GGRC?
2. ¿Tienes ideas sobre iniciativas que te gustaría que se realicen o lleven a cabo para aumentar el acceso a los servicios?
3. ¿Hay algún otro comentario que te gustaría hacer en relación con el acceso a los servicios?

# Thank you

# 谢谢

# Gracias

Amanda Pyle

Associated Executive Director

[Apyle@ggrc.org](mailto:Apyle@ggrc.org)

Israel Pichardo

Supervisor, Education & Orientation

[lpichardo@ggrc.org](mailto:lpichardo@ggrc.org)