

## STATEMENT OF ASSURANCES

This is to assure that Lavinia Johnson Fiscal Year (FY) 2026-2027 Performance Measures activities were developed in accordance with the requirements specified in Welfare & Institutions Code (WIC) Section 4629 and the Department of Developmental Services' (Department) FY 2026-2027 Performance Measures Guidelines.

The performance measures activities were developed through a public process which included:

- The regional center's governing board conducted one or more public meetings regarding its prior period contract performance measures and outcomes.
- This meeting(s) included notification to the Department, individuals served, families and individual community members at least 30 days prior to the meeting.
- Providing meeting and meeting materials with language access and scheduled meetings at times and locations that promoted attendance by the public.
- Considering strategies to promote opportunities for public comment by diverse language, racial and ethnic communities [WIC Section 4629 (f)(1)].
- Providing information, in an understandable form, to the community about regional center services and supports, including budget information and baseline data on services and supports and regional center operations [WIC Section 4629(c)(B)(i)].
- Conducting a public meeting where participants provided input on performance measures and using focus groups or surveys to collect information from the community [WIC Section 4629(c)(B)(ii)]; and,
- Circulating a draft of the performance measures to the community for input prior to presentation at a regional center board meeting where additional public input was taken and considered before adopting measures [WIC Section 4629(c)(B)(iii)].

Regional Center Executive Director: Lavinia Johnson

Date: 5-18-2026



Inland Regional Center FY 2026/2027 Performance Contract

July 1, 2026, to June 30, 2027

Letter from the Executive Director

June 29, 2026

To Whom It May Concern:

The FY 26/27 Performance Contract establishes the accountability framework used by the California Department of Developmental Services (DDS) to evaluate how Regional Centers fulfill their responsibilities under the Lanterman Developmental Disabilities Services Act. The contract includes key performance measures focused on areas such as community integration, Early Start services, employment outcomes, equity and cultural competency, individual and family satisfaction, person-centered planning, innovation, and regional center operations. These measures help ensure that individuals and families receive timely, high-quality services and support while maintaining compliance with state requirements.

In preparation for the development of this Performance Contract, Inland Regional Center hosted two virtual community focus groups and one virtual public input meeting to gather feedback from individuals served, family members, community organizations, and advocacy groups. The feedback received during these discussions helped inform you of the priorities and key areas of emphasis reflected in this contract.

You may find the Performance Contract at [www.inlandrc.org/accountability](http://www.inlandrc.org/accountability). If you have any questions, please contact CJ Cook at [community@inlandrc.org](mailto:community@inlandrc.org) or 909-890-3000.

Sincerely,

*Lavinia Johnson*

Lavinia Johnson

Executive Director

Inland Regional Center

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On April 10, 2026, IRC notified the Department of Developmental Services and the community of the Public Input Meeting scheduled for May 18, 2026, at 5:00 p.m., to be held virtually. The meeting was intentionally conducted in a virtual format to maximize accessibility and increase community participation across IRC's large and geographically diverse service area.

The Public Input Meeting was successfully held, with fifteen (15) attendees participating. Participants included IRC's Executive Director, Director of Children's Services, Director of Transition Services and Special Services, Community Engagement Manager, Service Access and Equity Manager, Program Administrator of Community Services, Cultural Specialist, American Sign Language (ASL) Facilitator, and a Department of Developmental Services (DDS) representative.

The meeting was conducted in English, Spanish, and American Sign Language.

#### **Public Comment: Complex Care Needs and Crisis Intervention Support**

Autism Society Inland Empire strongly advocates for the development of coordinated crisis intervention services that are accessible, responsive, and tailored to individuals with complex care needs. Investing in crisis intervention will not only improve outcomes for individuals and families, but will also reduce strain on emergency rooms, law enforcement, and other public resources. Autism Society Inland Empire strongly urges the development and implementation of these services in both Riverside and San Bernardino Counties.

Additionally, on April 10, 2026, IRC notified the Department of Developmental Services and the community of two virtual focus groups held on April 30, 2026, at 2:00 p.m. and 5:30 p.m. The 2:00 p.m. session had zero (0) attendees, and the 5:30 p.m. session had one (1) attendees.

**Note:** *Only one participant attended the 5:30 p.m. focus group; therefore, the group session did not occur. The Performance Contract was reviewed with the participant, who had not previously reviewed the draft contract, and the participant was invited to attend the May 18th meeting.*

Both the Public Input Meeting and the focus groups were broadly announced through IRC's established communication channels, including distribution via the IRC listserv, which reaches more than 9,000 subscribers. This audience includes staff, individuals served, family members, service providers, and advocacy organizations such as Disability Rights California (DRC), Disability Voices United (DVU), and the State Council on Developmental Disabilities (SCDD).

Finally, IRC promoted the Public Input Meeting and focus groups across all social media platforms beginning April 10, 2026, with recurring weekly posts continuing through the date of each session to reinforce awareness and encourage participation.

To the fullest extent practicable, input received through the Public Input Meeting and focus groups was reviewed and considered in the development of the FY 2026–2027 Performance Contract. Public comment was limited to one participant, no feedback was received from the focus groups, and no testimonials were provided.

Through broader outreach efforts and ongoing community engagement activities throughout the year, several barriers to engagement and understanding have been identified.

These included:

- The overall length and complexity of the Performance Contract document, which can be difficult for community members to fully review and interpret.
- The use of technical, administrative, and policy-specific language that may not be easily understood by individuals and families.

## MEASURES AND DATA SOURCES FOR PERFORMANCE MEASURES

### Community Integration

Measure Type	Measure	Data Source/Description	Activities/Responsible Unit
Policy	Number and percent of adults living independently with or without supports.	Client Master File (CMF) residence code (13 and 14) data for status 2 and 3 adults (18 years old and above) residing in independent living and supported living.	<p><b>Case Management</b></p> <p>IRC will use CMF residence code data to track the number and percentage of adults ages 18 and older living independently with or without supports in independent living and supported living settings, and use this information to monitor outcomes and inform service planning that promotes independence.</p>
Policy	Number and percent of adults residing in adult Family Home Agency homes.	CMF residence code (79) data for Lanterman eligible (status 2) adults (18 years old and above) residing in Adult Family Home Agency homes.	<p><b>Case Management</b></p> <p>IRC will use CMF residence code data to track the number and percentage of Lanterman-eligible adults ages 18 and older residing in Adult Family Home Agency homes and use this information to monitor residential trends and inform service planning and oversight.</p>
Policy	<p>Number and percent of adults residing in family homes (home of parent or guardian)</p> <p><u>Ages:</u></p> <ul style="list-style-type: none"> <li>• <u>18 to 35 years</u></li> </ul>	CMF residence code (11) data for status 2 adults (18 years old and above) residing in family homes (home of parent or guardian).	<p><b>Case Management</b></p> <p>IRC will use CMF residence code data to track the number and percentage of Lanterman-eligible adults ages 18 and</p>

	<ul style="list-style-type: none"> <li>• <u>36 to 50 years</u></li> <li>• <u>51+ years</u></li> </ul>		<p>older residing in family homes (home of a parent or guardian), including age groups 18–35, 36–50, and 51+, and use this information to monitor residential trends and inform service planning that supports independence and long-term outcomes.</p>
Policy	<p>Number and percent of adults residing in home settings.</p>	<p>CMF residence code data for status 2 (18 years old and above) residing in:</p> <ul style="list-style-type: none"> <li>• Independent living</li> <li>• Supported living</li> <li>• Adult Family Home Agency homes</li> <li>• Family homes</li> </ul>	<p><b>Case Management</b></p> <p>IRC will use CMF residence code data to track the number and percentage of Lanterman-eligible adults ages 18 and older residing in home settings, including independent living, supported living, Adult Family Home Agency homes, and family homes, and use this information to monitor residential outcomes and inform service planning that supports choice and independence.</p>
Policy	<p>Number and percent of minors living in facilities serving &gt; 6.</p>	<p>CMF residence code data for status 1, 2, and U minors residing in following facilities serving &gt; 6:</p> <ul style="list-style-type: none"> <li>• Intermediate Care Facility/Developmentally Disabled (ICF/DD)</li> <li>• Skilled Nursing Facility (SNF)</li> <li>• Community Care Facility (CCF)</li> </ul>	<p><b>Case Management</b></p> <p>IRC will use CMF residence code data to track the number and percentage of minors with Early Start (status 1), Lanterman eligibility (status 2), or provisional eligibility (status U) residing in ICF/DD, SNFs, and CCFs serving more than six individuals, and use this information to</p>

			monitor placement trends and inform efforts to support more integrated, family-like alternatives when appropriate.
Policy	Number and percent of adults living in facilities serving > 6.	CMF residence code data for status 2 adults residing in following facilities serving > 6: <ul style="list-style-type: none"> <li>• ICF/DD</li> <li>• SNF</li> <li>• CCF (Residential Care Facilities for the elderly not included)</li> </ul>	<p><b>Case Management</b></p> <p>IRC will use CMF residence code data to track the number and percentage of Lanterman-eligible adults residing in Intermediate Care Facilities for ICF/DD, SNFs, and CCFs serving more than six individuals (excluding Residential Care Facilities for the elderly), and use this information to monitor placement trends and inform planning and oversight efforts.</p>

**Early Start**

WIC/Measure Type	Measure	Data Source/Description	Activities/Responsible Unit
Compliance	<p>Timely Access to Early Start Services</p> <ul style="list-style-type: none"> <li>Percent of Individualized Family Service Plans (IFSP) completed within the federally required 45-day timeframe from receipt of referral for all children under the age of three.</li> </ul>	<p>Early Start Report (ESR) and Biennial DDS Monitoring data:</p> <ul style="list-style-type: none"> <li>Date referral was first received, until the date the IFSP is signed and completed, including allowance of exceptional family circumstances.</li> <li>Number of children under the age of three with completed IFSP within timelines compared to total number of children under the age of three with completed IFSP.</li> </ul>	<p><b>Early Start Case Management</b></p> <p>IRC will use ESR and Biennial DDS Monitoring data to track timely access to Early Start services by monitoring the percentage of IFSPs completed within the federally required 45-day timeline for children under age three, including consideration of allowable exceptional family circumstances, and use this information to improve timelines and service coordination.</p>
Compliance	<p>Provisional Eligibility</p> <ul style="list-style-type: none"> <li>Number of children who turn age 5 and continue regional center services through provisional eligibility.</li> </ul>	<p>CMF, Provisional eligibility (status U) and number of children with status code U beyond age 5.</p>	<p><b>Early Start Case Management</b></p> <p>IRC will use CMF data to monitor the number of children who continue receiving regional center services through provisional eligibility (status U) beyond age five and use this information to support timely eligibility determinations and</p>

			appropriate service planning.
Incentive	Submission of Completed ESR: • Percentage of completed ESR submitted to DDS for children exiting Early Start, inclusive of all required fields.	CMF and ESR Early Start (Status 1), and Lanterman Eligible (status 2) and U under 36 months.	<b>Early Start Case Management</b>  IRC will use CMF and ESR data to ensure timely and complete submission of Early Start Reports to DDS for children exiting Early Start, including verification that all required fields are completed for children under 36 months with Early Start (status 1), Lanterman eligibility (status 2), or provisional eligibility (status U).
Incentive	Planning for Services After Early Start 1. Percentage of children who receive a timely transition meeting at least 90 days prior to their third birthday. 2. Percentage of children transitioning from Early Start to Lanterman Act Services or Provisional Eligibility, who have a completed IPP no more than 60 days following their third birthday.	ESR • Using CMF data for those who are in status 1 transitioning to Lanterman or Provisional eligibility (status 2 or U) at least 90 days prior to a child's third birthday. • Using CMF data Percentage of Individual Program Plan data	<b>Early Start Case Management</b>  IRC will use ESR and CMF data to ensure timely planning for services after Early Start by monitoring that transition meetings occur at least 90 days prior to a child's third birthday and that an IPP is completed within 60 days following the third birthday for children transitioning to Lanterman eligibility (status 2) or provisional eligibility (status U).

## Employment

### Employment Development Department (EDD) Data Disclaimer

Data obtained from the Employment Development Department (EDD) is sourced from external reporting entities and third-party submissions. Such data may be subject to reporting delays, methodological limitations, revisions, or inaccuracies beyond the control of the organization. Accordingly, EDD data may not fully reflect real-time conditions or capture all relevant contextual factors and should not be construed as definitive, determinative, or solely attributable to organizational performance. Any reliance on EDD data shall be made with appropriate consideration of its external origin and inherent limitations.

WIC/Measure Type	Measure	Data Source/Description	Activities/Responsible Unit
Policy	Number and percentage of individuals ages 16-64 with earned income.	Employment Development Department (EDD) and CMF data <ul style="list-style-type: none"> <li>• Number and percentage of status 2 individuals ages 16-64 with earned income as reported to EDD.</li> </ul>	<b>Case Management and Employment Specialist</b>  IRC will use EDD and CMF data to track the number and percentage of Lanterman-eligible individuals (status 2), ages 16–64, with earned income and monitor trends to support employment planning and service coordination.
Policy	Average annual wages for individuals ages 16-64.	EDD data <ul style="list-style-type: none"> <li>• Average annual wages as reported to EDD for status 2 individuals ages 16-64.</li> </ul>	<b>Case Management and Employment Specialist</b>  IRC will use EDD and CMF data to monitor average annual wages for Lanterman-eligible individuals (status 2), ages 16–64, and use this information to inform employment

			supports and service planning.
Policy	Number of adults who entered in competitive integrated employment following participation in a Paid Internship Program.	Data collected through Department survey (Welfare & Institutions Code (WIC) Section 4870(e)) of regional centers.	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will use data collected through the Department’s regional center survey, as required under WIC Section 4870(e), to track the number of adults who enter competitive integrated employment following participation in a Paid Internship Program and use this information to assess outcomes and inform employment supports and planning.</p>
Policy	Percentage of adults who entered in competitive integrated employment following participation in a Paid Internship Program.	Data collected through Department survey WIC Section 4870(e) of regional centers.	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will use data collected through the Department’s regional center survey, as required under WIC Section 4870(e), to track the percentage of adults who enter competitive integrated employment following participation in a Paid Internship Program and use this information to evaluate program effectiveness and</p>

			inform employment planning and supports.
Policy	Average hourly or salaried wages and hours worked per week for adults who participated in a Paid Internship Program during the prior fiscal year.	Data collected through Department survey WIC Section 4870(e) of regional centers.	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will use data collected through the Department’s regional center survey, as required under WIC Section 4870(e), to monitor average hourly or salaried wages and hours worked per week for adults who participated in a Paid Internship Program during the prior fiscal year and use this information to inform employment outcomes and supports.</p>
Policy	Average wages and hours worked for adults engaged in competitive integrated employment on behalf of whom incentive payments have been made.	Data collected through Department survey WIC Section 4870(e) of regional centers.	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will use data collected through the Department’s regional center survey, as required under WIC Section 4870(e), to monitor average wages and hours worked for adults engaged in competitive integrated employment for whom incentive payments have been made, and use this information to</p>

			<p>assess employment outcomes and inform ongoing employment supports and planning.</p>
<p>Policy</p>	<p>Total number of 30-day, 6-month and 12-month incentive payments made for the fiscal year.</p>	<p>Data collected through Department survey WIC Section 4870(e) of regional centers.</p>	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will use data collected through the Department's regional center survey, as required under WIC Section 4870(e), to track the total number of 30-day, 6-month, and 12-month incentive payments made during the fiscal year and use this information to monitor employment stability and evaluate incentive-based employment outcomes.</p>
<p>Incentive</p>	<p>Percentage of adults having competitive, integrated employment as a goal/outcome in their IPP and have a job with reportable wages.</p>	<p>IPP data (Employment life area) cross walked with data from EDD</p>	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will crosswalk IPP employment life-area data with EDD data to track employment outcomes for individuals served and</p>

			use the information to inform employment supports, planning, and service coordination.
Incentive	<p>Data Updates and Reporting</p> <ul style="list-style-type: none"> <li>Percentage of individuals ages 16 and older who have updated employment-related information documented in the Client Development Evaluation Report (CDER).</li> </ul>	<p>CDER Personal Outcomes Element questions 5 through 8.</p>	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will use CDER Personal Outcomes Element data from questions 5 through 8 to monitor individual outcomes, identify trends related to personal well-being and independence, and inform service planning and quality improvement efforts.</p>
Incentive	<p>Development and Outreach</p> <ul style="list-style-type: none"> <li>Implementation of the Employment Development and Outreach Plan to increase employment opportunities and outcomes for individuals.</li> </ul>	<p>Regional center survey and Department monitoring of the Employment Development and Outreach Plans.</p> <p><b>DUE DATE: July 31, 2027</b></p>	<p><b>Case Management and Employment Specialist</b></p> <p>IRC will implement the Employment Development and Outreach Plan to increase employment opportunities and improve employment outcomes for individuals served, using regional center survey data and Department monitoring to track progress and ensure timely completion by <b>July 31, 2027</b>.</p>

**Equity and Cultural Competency**

<b>WIC/Measure Type</b>	<b>Measure</b>	<b>Data Source/Description</b>	<b>Activities/Responsible Unit</b>
Policy	<p>Expenditures: In-Home Purchase of Services (POS)            Comparison of the POS expenditure amounts for individuals living at home to identify any differences across race, ethnicity and/or language when compared to the per capita average.</p>	<p>Data source: Age-adjusted per-capita POS expenditures by FY from CMF and POS records.            Population: Individuals living in family homes (residence codes 11, 78, 80)            Definition: How much average spending differs between racial groups and language groups compared to the regional center's overall average.</p>	<p><b>Case Management/ Service Access and Equity team</b></p> <p>IRC will analyze age-adjusted, per-capita In-Home POS expenditures using CMF and POS data for individuals living in family homes to identify and address any differences in spending across race, ethnicity, and language when compared to the regional center's overall average. In addition, IRC will utilize Language Access and Cultural Competency (LACC) funding to engage the community and continue efforts to reduce disparities identified in current POS practices.</p>
Policy	<p>Expenditures: In-Home Respite POS            Comparison of POS expenditure amounts for all respite services delivered to people living in family homes, across race, ethnicity and language, when</p>	<p>Data source: Age-adjusted per-capita POS expenditures by FY from CMF and POS records.            Population: Individuals living in family homes (residence codes 11, 78, 80) who use respite services            Definition: How much average spending differs between racial groups and language groups compared</p>	<p><b>Case Management/ Service Access and Equity team</b></p> <p>IRC will analyze age-adjusted, per-capita In-Home Respite POS expenditures using CMF and POS data for</p>

	compared to the per capita average.	to the regional center's overall average.	individuals living in family homes who receive respite services to identify and address any differences in spending across race, ethnicity, and language when compared to the regional center's overall average. In addition, IRC will utilize LACC funding to engage the community and continue efforts to reduce disparities identified within current respite POS expenditures.
Policy	Service Utilization: Early Start Per capita Early Start Expenditures, separated and compared by race, ethnicity and language preference.	Data source: POS expenditures and authorization amount by FY from CMF and POS records. Population: Early Start participants age 0 to 36 months Definition: How much utilization differs between racial groups and language groups, compared to the regional center's overall average.	<b>Early Start Case Management/ Service Access and Equity team</b>  IRC will analyze per-capita Early Start POS expenditures and authorization data using CMF and POS records for children ages 0 to 36 months to identify differences in service utilization across race, ethnicity, and language when compared to the regional center's overall average. IRC will use this data to inform service planning and equity efforts and will utilize LACC funding to

			engage the community and continue working to reduce identified disparities in Early Start service utilization.
Incentive	<p>Linguistic Diversity</p> <ul style="list-style-type: none"> <li>• Increase number of bilingual staff, including service coordinators, intake staff and first line supervisors, over FY 2025-26 in one of the RC's top 5 languages spoken.</li> </ul>	<p>CMF data for languages spoken most frequently and regional center reports on staff who are bilingual.</p> <p><b>DUE DATE: July 31, 2027</b></p>	<p><b>Human Resources</b></p> <p>IRC will use CMF data on primary languages spoken and internal staffing reports to increase the number of bilingual staff—including Service Coordinators, intake staff, and first-line supervisors—in one of the regional center's top five most frequently spoken languages during FY 2025–26, with completion targeted by <b>July 31, 2027.</b></p>

**Individual/Family Experience and Satisfaction**

**National Core Indicators (NCI) Disclaimer**

National Core Indicators (NCI) data are derived from periodic surveys and are provided for informational and quality-improvement purposes only. NCI results do not constitute a comprehensive evaluation of performance, compliance, or effectiveness, and shall not be construed as definitive, determinative, or legally binding evidence of organizational performance. Outcomes reflected in NCI data may be influenced by individual, community, systemic, or external factors beyond the control of the organization. Reliance on NCI results shall be subject to appropriate contextual analysis and shall not create any contractual rights, guarantees, or obligations.

WIC/Measure Type	Measure	Data Source/Description	Activities/Responsible Unit
Policy	Number and percent of individuals, by race/ethnicity, who are satisfied with the services and supports received by the family and family member.	Most recent National Core Indicator (NCI) data available: <ul style="list-style-type: none"> <li>• Child Family Survey</li> <li>• Adult Family Survey</li> <li>• Family Guardian Survey</li> </ul>	<p><b>Case Management/Community Services</b></p> <p>IRC will use the most recent NCI data, including the Child Family Survey, Adult Family Survey, and Family Guardian Survey, to track the number and percentage of individuals satisfied with services and supports by race and ethnicity and use this information to assess equity, identify trends, and guide service quality improvement efforts.</p> <p>IRC has an assigned Service Access and Equity Team liaison with SCDD to assist with this process.</p>
Policy	Number and percent of individuals, by race/ethnicity, whose IPP/IFSP includes all of the	Most recent NCI data available <ul style="list-style-type: none"> <li>• Child Family Survey</li> <li>• Adult Family Survey</li> <li>• Family Guardian Survey</li> </ul>	<p><b>Case Management/Community Services</b></p>

	services and supports needed.		<p>IRC will use the most recent NCI data, including the Child Family Survey, Adult Family Survey, and Family Guardian Survey, to track the number and percentage of individuals, by race and ethnicity, whose IPP or IFSP includes all services and supports needed, and use this information to identify trends, assess equity, and inform service quality improvement efforts.</p> <p>IRC has an assigned Service Access and Equity Team liaison with SCDD to assist with this process.</p>
Policy	Number and percent of individuals who feel that services and supports have made a positive difference in the life of their family member.	<p>Most recent NCI data available</p> <ul style="list-style-type: none"> <li>• Child Family Survey</li> <li>• Adult Family Survey</li> <li>• Family Guardian Survey</li> </ul>	<p><b>Case Management/Community Services</b></p> <p>IRC will use the most recent NCI data, including the Child Family Survey, Adult Family Survey, and Family Guardian Survey, to track the number and percentage of individuals who report that services and supports have made a positive difference in the life of their family member and use this information to assess outcomes, identify trends, and guide service quality and equity improvement efforts.</p>

			IRC has an assigned Service Access and Equity Team liaison with SCDD to assist with this process.
Incentive	Individual Program Plan experience: • Percent of IPP surveys received by the Department compared to total number of IPP's completed per quarter (locked/ distributed)	A rate will be established, comparing the number of IPP surveys attributed to each regional center, completed through the IPP Survey link (or through email or by paper and received by the Department in its data system) compared to the number of IPP's attributed to each regional center and identified as locked and distributed in the regional center case management system, each quarter of the fiscal year.	<b>Case Management</b>  IRC will use IPP experience data to monitor the percentage of IPP surveys received by the Department compared to the total number of IPPs locked and distributed each quarter, using this rate to assess participation, identify trends, and inform improvements in person-centered planning and engagement. IRC Service Coordinators will also encourage parents, caregivers, and clients to complete IPP surveys to increase participation and ensure feedback reflects their experiences.

**Person Centered Planning**

<b>WIC/Measure Type</b>	<b>Measure</b>	<b>Data Source/Description</b>	<b>Activities/Responsible Unit</b>
Incentive	<p>Person Centered Facilitation Skills</p> <ul style="list-style-type: none"> <li>Regional centers have one certified person-centered plan facilitation trainer employed for every 10,000 people enrolled in services.</li> </ul>	<p>CMF and regional center reported. Regional centers will report:</p> <ul style="list-style-type: none"> <li>The names of their employees who are certified to deliver Person Centered Plan Facilitation Training each quarter of the fiscal year.</li> </ul> <p>To meet this measure regional centers must have a minimum of one certified trainer per 10,000 individuals served in the regional center service area in each quarter.</p> <p><b>DUE DATE: July 31, 2027</b></p>	<p><b>Training and Development Department</b></p> <p>IRC will use CMF data and regional center reports to ensure sufficient Person-Centered Plan Facilitation capacity by maintaining at least one certified facilitator trainer for every 10,000 individuals served. The regional center will report quarterly on employees certified to deliver Person-Centered Plan Facilitation Training and use this information to monitor compliance each quarter, with full compliance achieved no later than <b>July 31, 2027</b>.</p>
Incentive	<p>Informational Outreach to Individuals and Families</p> <ul style="list-style-type: none"> <li>Implementation of the informational outreach to individuals and families about person-centered practices.</li> </ul>	<p>Regional center reported</p> <ul style="list-style-type: none"> <li>Number of informational outreach activities focused on person centered service practices to individuals and family members completed.</li> </ul> <p><b>DUE DATE: July 31, 2027</b></p>	<p><b>Community Engagement</b></p> <p>IRC will implement informational outreach activities to educate individuals and families about person-centered practices, track the number of outreach efforts completed</p>

			through regional center reporting, and use this information to support engagement and understanding of person-centered services, with completion targeted by <b>July 31, 2027.</b>
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**Innovation in Service Availability, Delivery and Technology**

<b>WIC/Measure Type</b>	<b>Measure</b>	<b>Data Source/Description</b>	<b>Activities/Responsible Unit</b>
Incentive	<p>Website Accessibility</p> <p>1. Regional center website meets 100% of Web Contents Accessibility Guidelines 2.1 (WCAG 2.1).</p> <p>2. Regional center’s website meets WCAG 2.2 Guidelines.</p>	<p>Checklist and testing result submitted by each regional center which demonstrates the requirements of WCAG 2.1 or 2.2</p> <p>For measure two, regional centers will need to, at minimum, begin website revisions to meet WCAG 2.2 standards in FY 2025-26 and complete the revisions to fully meet 100% of the WCAG 2.2 standard within FY 2026-27.</p> <p>Regional centers will revise their websites to comply with WCAG 2.1 AA standards.</p> <p><b>DUE DATE: July 31, 2027</b></p>	<p><b>IT Department/Community Services Webmaster</b></p> <p>IRC will revise and maintain its website to meet 100% compliance with WCAG 2.1 AA and WCAG 2.2 standards by conducting required testing, submitting compliance checklists, and completing phased website updates, with revisions to meet WCAG 2.2 initiated in FY 2025–26 and full compliance achieved by FY 2026–27, no later than <b>July 31, 2027.</b></p>

**Service Coordination and Regional Center Operations**

<b>WIC/Measure Type</b>	<b>Measure</b>	<b>Data Source/Description</b>	<b>Activities/Responsible Unit</b>
Compliance	The regional center achieves an unqualified independent audit with no material finding(s).	Yes/No—based on regional center independent audit findings submitted to the Department by April 1.	<b>CFO/Audits</b> Report by deadline
Compliance	The regional center achieves substantial compliance with the Department fiscal audit.	Yes/No—based on the Department internal document criteria.	<b>CFO/Audits</b> Report by deadline
Compliance	The regional center operates within operations budget.	Yes/No—actual expenditures plus late bills do not exceed operations budget. • Operations and Purchase of Service Claims Data	<b>CFO/Audits</b> Report by deadline
Compliance	Compliance with Vendor Audit Requirements per contract, Article III, Section 9. • The number of vendor audits completed compared to the number of vendor audits required per Article III, Section 9 of the Regional Center/Department Contract.	Yes/No - met or did not meet the required number of vendor audits per the contract, based on documentation regional center reports to the Department	<b>Operations/Audits</b> Report by deadline
Compliance	Percentage of status 2 and U clients who have a Client Development Evaluation Report (CDER) updated or reviewed within the past 365 days.	Client Master File (CMF) and CDER • Percentage of status 2 and U individuals with current (within 1 year) CDER for ages 3 and above.	<b>Case Management/Audits</b> Report by deadline

Compliance	<p>Intake/assessment timelines for individuals ages 3 and older.</p> <ul style="list-style-type: none"> <li>• The percentage of Intake/assessments completed on time compared to the total number of intake and assessments completed by the regional center within the reporting period.</li> </ul>	<p>CMF Calculated by first identifying the date of each status 2 (Lanterman Eligible) determination in FY 26-27, compared to the CMF date for intake/assessment (status 0).</p>	<p><b>Intake/Clinical/Audits</b></p> <p>IRC will use CMF data to monitor intake and assessment timelines for individuals ages three and older by tracking the percentage of intake and assessments completed on time compared to the total number completed during the reporting period. This measure will compare the CMF intake/assessment date (status 0) to the date of Lanterman eligibility determination (status 2) in FY 26/27 to assess timeliness and support process improvement efforts.</p>
Compliance	<p>Percentage of Individual Program Plan's for individuals enrolled in a federal waiver that meet requirements outlined in WIC 4646 and 4646.5</p>	<p>Department Monitoring: Home and Community Based Services (HCBS) Biennial Department review per WIC Section 4646.5 (c)(3).</p> <ul style="list-style-type: none"> <li>• During Biennial monitoring reviews a random sample of IPP's are reviewed for those on the HCBS waiver (HCBS 1915c, and 1915i SPA) to ensure compliance with requirements outlined in WIC 4646 and 4646.5. The percentage is the number of IPP's reviewed that meet compliance compared to the total sample.</li> </ul>	<p><b>Med-Wavier/Audits</b></p> <p>IRC will use results from the Department's HCBS Biennial Monitoring Review to track the percentage of IPPs for individuals enrolled in federal waiver programs that meet the requirements outlined in WIC Sections 4646 and 4646.5, and use this information to monitor compliance with person-centered planning standards and guide quality improvement efforts.</p>
Policy	<p>Vendorization</p> <ul style="list-style-type: none"> <li>• Percentage of Vendorization that</li> </ul>	<p>Provider Directory, Vendorization Portal</p>	<p><b>Vendorization/Community Services</b></p>

	<p>met the regulatory 45-day timeline in the Decision Stage.</p> <ul style="list-style-type: none"> <li>• Average number of days from application submissions to final decision on Vendorization approval.</li> </ul>	<p>Total number of Vendorization completed divided by the total number that was completed in 45 days or less.</p> <p>Average days from application submission to approval by the regional center.</p>	<p>IRC will use data from the Provider Directory and Vendorization Portal to monitor Vendorization timeliness by tracking the percentage of Vendorization decisions completed within the 45-day regulatory timeline and calculating the average number of days from application submission to final approval, using this information to improve efficiency and ensure timely access to services.</p>
Compliance	<p>Substantial compliance with HCBS Final Settings Rule: Community Settings requirements.</p> <ul style="list-style-type: none"> <li>• The number of HCBS settings vendor audits completed compared to the number of HCBS vendors required to demonstrate compliance with the settings rules.</li> </ul>	<p>Regional center survey: Percentage of HCBS settings reviewed for compliance with final settings rules.</p>	<p><b>Case Management/ Med-Wavier</b></p> <p>IRC will monitor substantial compliance with the HCBS Final Settings Rule by tracking the number of HCBS vendor audits completed compared to the total number of HCBS vendors required to demonstrate compliance, using regional center survey data to measure the percentage of community settings reviewed and ensure adherence to community integration requirements.</p>
Policy	<p>Medicaid Waiver Enrollment</p> <ul style="list-style-type: none"> <li>• Of the total number of regional center</li> </ul>	<p>CMF Status 2 and U; Department data on Medicaid 1915c waiver enrollment for both traditional and SDP waivers.</p>	<p><b>Case Management/Med-Wavier</b></p> <p>IRC will use CMF data and Department Medicaid waiver enrollment data to</p>

	individuals who meet 1915c eligibility, the percentage of those who are enrolled in a federal waiver, separated by waiver type.		track the percentage of individuals who meet 1915(c) eligibility and are enrolled in a federal waiver, separated by waiver type, and use this information to monitor access, identify gaps, and support timely enrollment in appropriate waiver programs.
Compliance	Special Incident Reports (SIRs) are submitted within the required timeframes. <ul style="list-style-type: none"> <li>• The percentage of SIR reports submitted by the vendor and regional center within the required timeframes.</li> </ul>	Department Special Incident Reports (SIR) reports – annual percentage of SIRs reported on time under Title 17 requirements. <ul style="list-style-type: none"> <li>• Regional center timeliness</li> <li>• Vendor Timeliness</li> </ul>	<b>Case Management/ QA</b> IRC will use Department SIR data to monitor the percentage of SIRs submitted within required Title 17 timeframes by both vendors and the regional center, tracking regional center and vendor timeliness to identify trends, address delays, and support compliance and quality oversight.
Incentive	Choice of Services within Regional Centers <ul style="list-style-type: none"> <li>• Number of vendors for each core service type, delivering services within the regional center catchment area, reported by zip code.</li> </ul>	The number of vendors reporting services delivered under each service code, and within zip codes of the regional center.	<b>Resource Developmental/ Vendorization</b> IRC will track service choice and availability by monitoring the number of vendors providing each core service type within the regional center catchment area, reported by zip code, using vendor service code and location data. This information will be used to assess geographic access to services, identify gaps, and support informed service planning and

			provider development efforts.
Incentive	Timely Authorizations • Number of days between individual program plan (IPP) review and service authorization, reported as an average and range.	Data will be pulled from the Individual Program Plan (IPP), noting the date of the IPP review meeting, and the final date of service authorization from the Uniform Fiscal System.	<b>Case Management/POS</b>  IRC will monitor the timeliness of service authorizations by tracking the number of days between the IPP review meeting and the final service authorization, using IPP dates and Uniform Fiscal System data to calculate the average and range, and using this information to identify delays and improve timely access to services.
Incentive	Service Coordinator Competency • Number of new service coordinators who completed all requirements within the training standards and competencies.	The number of newly hired service coordinators registered within the Learning Management System (LMS) during the time period of <b>July 1, 2026, to June 30, 2027.</b>	<b>Training and Development/ Executive Team</b>  IRC will track and monitor the number of newly hired Service Coordinators who complete all required training standards and competency requirements by using LMS data for staff registered between <b>July 1, 2026, and June 30, 2027</b> , to ensure readiness and quality service coordination.
Incentive	Benefits - Medical Insurance Information	Percentage of individuals enrolled in the regional center for whom complete, and up-to date medical insurance information is documented in the	<b>Case Management</b>  IRC will monitor the percentage of individuals enrolled with the regional center who have complete and up-to-date medical

		<p>regional center case management system.</p> <ul style="list-style-type: none"> <li>• The data on medical insurance must follow the standard format that is available in the SANDIS ID#s/Insurance field.</li> </ul>	<p>insurance information documented in the case management system, ensuring data is entered in the standardized SANDIS ID#/Insurance field, and use this information to support access to benefits and accurate service coordination.</p>
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