San Andreas Regional Center
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Performance Report for San Andreas Regional Center

Every year, the Department of Developmental Services (DDS) contracts with regional centers in California to serve consumers and families. And, every year DDS looks at how well the regional centers are doing. This report will give you information about your regional center.

Last year, at San Andreas Regional Center (SARC) we served about 15,500 consumers. The charts on page 2 tell you about the consumers we serve. You'll also see how well we are doing in meeting our goals and in fulfilling our contract with DDS.

At SARC, we want to improve every year, do better than the state average, and meet or exceed the DDS standard. As you can see in this report, we did well in reducing the number of residents of state developmental centers, keeping children in family homes, keeping adults in their parent's homes and supported living, and keeping SARC clients from needing to reside in large treatment facilities. However, we still need to improve in keeping children in family-like settings, expand our use of Family Home Agencies, and do more to ensure that adults can live independently in their own home.

SARC faces particular challenges around housing for the individuals it serves. As a result, we have specifically moved to work more closely with Housing Choices Coalition and other housing providers and community stakeholders to assist our consumers to live and thrive in our community. We have additionally begun to develop new, specialized residential treatment facilities targeting our individuals who still reside at Sonoma Developmental Center.

SARC's intake process fell below the state average in meeting the statutory timeline for determining eligibility. SARC experienced a great deal of turnover among its psychologists and intake department during 2014-15 with staff departures and retirement; however, the department is now fully-staffed, as its improvement shows. Otherwise, SARC has met or exceeded its compliance targets.

SARC is also focusing on increasing outreach to under-served populations to increase awareness and use of our services in order to reduce possible service disparities. SARC will be hosting a number of conferences and community events in multiple languages and communities. Additionally, SARC continues to be a leader in ensuring individuals have access to dental care.

We hope this report helps you learn more about SARC. If you have any questions or comments, please contact us!

This report is a summary. To see the complete report, go to: wwww.sanandreasregional.org

Or contact James Elliott at **408-341-3828**.

E-mail: james@sarc.org

Sincerely

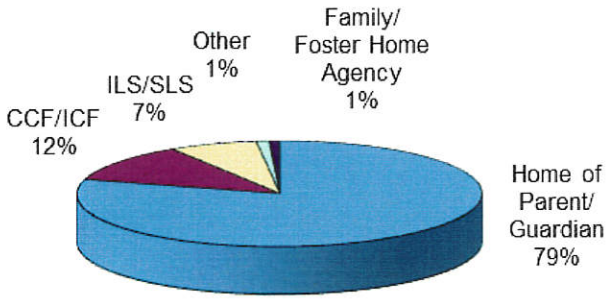
Javier Zaldivar

Executive Director

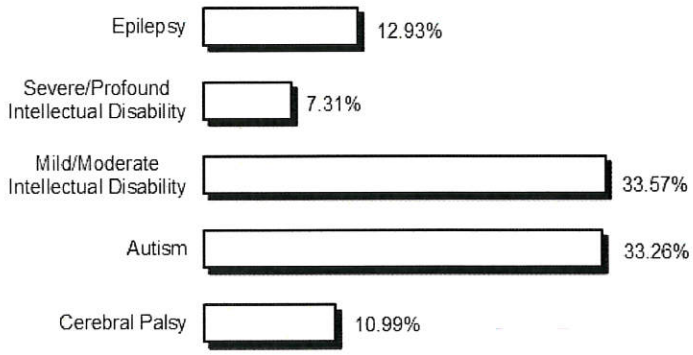
Who uses SARC?

These charts tell you about who SARC consumers are and where they live.

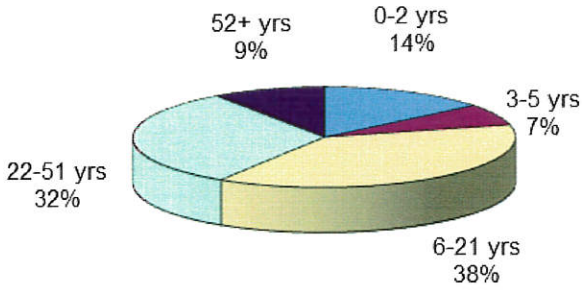
WHERE SARC CONSUMERS LIVE



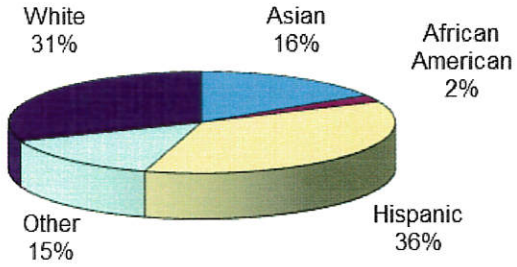
PRIMARY DIAGNOSIS OF SARC CONSUMERS



AGE OF SARC CONSUMERS



ETHNICITY OF SARC CONSUMERS



How well is SARC performing?

This chart tells you about 5 areas where DDS wants each regional center to keep improving.

The first column tells you how SARC was doing at the beginning of 2015. And, the second column shows how SARC was doing at the end of 2015.

To see how SARC compares to the other regional centers in the state, compare the numbers to the state averages (in the shaded columns).

Regional Center Goals (based on Lanterman Act)	**December 2014**		**December 2015**	
	State Average	SARC	State Average	SARC
Less consumers live in developmental centers	0.42%	0.13%	0.36%	0.11%
More children live with families	99.04%	98.61%	99.15%	98.70%
More adults live in home settings*	77.30%	75.50%	78.04%	76.38%
Less children live in large facilities (more than 6 people)	0.07%	0.01%	0.06%	0.01%
Less adults live in large facilities (more than 6 people)	2.96%	1.97%	2.78%	1.85%

** Home settings include: independent living, supported living, Adult Family Home Agency homes, and consumers' family homes.*

Did SARC meet DDS standards?

Read below to see how well SARC did in meeting DDS compliance standards:

Areas Measured	Last Period	Current Period
Passes independent audit	Yes	Yes
Passes DDS audit	Yes	Yes
Audits vendors as required	Met	Met
Didn't overspend operations budget	Yes	Yes
Participates in the federal waiver	Yes	Yes
CDERs and ESRs are updated as required (CDER is the Client Development Evaluation Report and ESR is the Early Start Report. Both contain information about consumers, including diagnosis.)*	94.34%	95.34%
Intake/Assessment timelines for consumers age 3 or older met	83.33%	95.98%
IPP *(Individual Program Plan)* requirements met	98.38%	97.92%
IFSP *(Individualized Family Service Plan)* requirements met	83.89%	81.33%

**CDER and ESR currency percentages were weighted based on the regional center's Status 1 and Status 2 caseloads, to arrive at a composite score.*

SARC's CDER currency was 99.14%, higher than the state average.

IPP and IFSP timely completion rates dropped over the past year; this corresponds with an increase in caseload size and service coordinator turnover.

All other compliance measures were met or exceeded.

Want more information?

To see the complete report, go to: <www.sanandreasregional.org

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