

# RIGHTS UNDER THE LANTERMAN ACT

## *Individual Program Plans*

### Chapter 4

This chapter explains:

- What an IPP is
- How to make one that is right for you,
- How to put your IPP into practice, and
- How to change your IPP as your needs change.



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# Chapter 4: Individual Program Plans

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# Chapter 4

## Individual Program Plans

*This chapter gives you answers to the most common questions about Individual Program Plans, called IPPs for short. We explain what an IPP is, how to make one that is right for you, and how to put your IPP into practice.*

*You will also learn how to:*

- *Change your IPP as your needs change,*
- *Get information in a language you can understand, and*
- *Use vouchers and work with your regional center to get the services and supports you need.*

*This information is based on a state law called the Lanterman Act. We also give you the exact section of this state law where the information is found. You may have to refer to the law to get the services you need. When you see § 4512(a), for example, it means that information comes from the Lanterman Act, section (§) 4512, part a.*

*If you want to read the Lanterman Act, go to:*

<http://www.dds.ca.gov/Statutes/LantermanAct.cfm>

### **1. What is an Individual Program Plan (IPP)?**

The Individual Program Plan, called IPP for short, is a document that says what services and supports you need and prefer. It also says who will provide those services and supports. The IPP is like a contract: once you and the regional center agree on what is in the IPP, the regional center must do what the IPP says.<sup>1</sup> You can only get the services listed in your IPP, unless you change your IPP.

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<sup>1</sup>“While it is true that regional centers have ‘wide discretion’ in determining *how* to implement the IPP, they have no discretion at all in determining *whether* to implement it; they must do so (§ 4648).” *Association for Retarded Citizens-California (ARC) v. Department of Developmental*

The IPP describes your needs, preferences and choices, your goals and objectives, and the services and supports you need to reach those goals. The IPP focuses on you and, where appropriate, on your family. Your IPP should help you stay in your community and enjoy an independent, productive, and normal life.<sup>2</sup>

This chapter explains the IPP planning and writing process and how to make sure that your goals, choices, and needs are at the center of your IPP. For example, your IPP should include:

- Information about your strengths, choices, and needs.<sup>3</sup>
- The specific services and supports you need and choose to lead a more independent and productive life.<sup>4</sup>
- The specific services you need to meet your individual needs.<sup>5</sup> It must also list the amount of services and supports you need.
- Who will provide those services and supports.

Your IPP must indicate if your regional center will provide, supervise, or arrange for the services, or if the services will be provided by another agency. Your IPP must also say if the regional center will pay for the service.<sup>6</sup> The Supplements at the end of this book can help you plan for your IPP so you

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*Services (DDS)* (1985) 38 Cal.3d 384, 390 (italics in original). All references in this manual are to the Lanterman Act unless it says otherwise. The § symbol means “section.”

<sup>2</sup> § 4646(a).

<sup>3</sup> § 4646.5(a)(1).

<sup>4</sup> §§ 4501, 4502(a).

<sup>5</sup> “The [Lanterman] Act clearly contemplates that the services to be provided each client will be selected ‘on an individual basis.’” *Williams v. Macomber* (1991) 226 Cal.App.3d 225, 232 (citing *ARC v. DDS*, supra, 388, 390).

<sup>6</sup> § 4646.5(a)(4). “The services and supports the regional center agrees to provide to its clients should be set forth in unambiguous language. In the instant case, the provision that the regional center will ‘request’ funding is ambiguous because it is unclear whether the agency is agreeing to provide the services enumerated or is only agreeing to request them. Since the service agency stated that it is committed to provide claimant with the services set forth in its proposed IPP – and not merely request them – the IPP should reflect this in unambiguous language.” In the Matter of *T.S. v. Golden Gate Regional Center*, OAH Case No. 2003020153 & N2003010267 (citing *ARC v. DDS*, supra, 390).

can get the services you need. Please use the checklists in Supplements J, K and L to get ready for your IPP meeting.

## **2. What is a “person-centered” IPP meeting?**

It’s important for you to have an IPP that meets your needs and reflects your choices and preferences. To achieve this, the IPP meeting should be focused on you! This is called “person-centered.” Person-centered planning is an approach to working toward the future you want for yourself.<sup>7</sup> It gives you a way to say:

- Where you want to live and work,
- Who you want to live with,
- How and with whom you want to spend your time, and
- How you want to arrange other important parts of your life.<sup>8</sup>

You must participate in making your IPP plan so you and your IPP team can agree on the support you need to achieve your goals and dreams.<sup>9</sup> It is an ongoing process, not just one meeting. And it’s all about YOU and your goals.

## **3. What if I do not understand what is being said at my IPP meeting?**

Everyone at the meeting should speak in a way that you understand. If someone uses a word or phrase that you do not understand, ask them to explain it. If you or your family do not speak English well, ask for an interpreter.

The IPP meeting is your chance to talk about what is important to you. It’s important to communicate the kinds of things you need from the regional center and other agencies, such as Medi-Cal and IHSS, and from your family, friends, and service providers.

## **4. Where can I get more information about how to get ready for my IPP meeting?**

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<sup>7</sup> § 4646(a).

<sup>8</sup> § 4502(j).

<sup>9</sup> §§ 4512(j), 4646.

Call Disability Rights California or OCRA, and ask for a copy of:

*Your IPP – It’s Not Just A Piece of Paper.* It was written by consumers for consumers, so it is easy to understand.<sup>10</sup>

DDS also has these publications:

*More Than a Meeting.*<sup>11</sup> This is a short, easy-to-understand guide to IPPs. *Individual Program Plan Resource Manual: A Person-Centered Approach.* This manual explains the details of the IPP process and best practices. It also includes examples of different methods of person-centered planning and success stories.

*From Process to Action: Making Person-Centered Planning Work.* This *booklet* shares real life stories about consumers who set their goals and objectives and used the IPP process to achieve them.

*Picture Sticker Book for use with the “Making My Own Choices” Booklet and “Satisfaction Guide.”* These booklets help consumers make choices and identify what is important to them.

These and other DDS publications are available at:

[www.dds.cahwnet.gov/publications/reports\\_publications.cfm](http://www.dds.cahwnet.gov/publications/reports_publications.cfm).

Call DDS: **(916) 654-1956**

Or get more information or copies from:

Department of Developmental Services

**Carol Risley or Kathleen Ozeroff**

Office of Human Rights and Advocacy Services

**1600 9th Street, Room 240, Sacramento, CA 95814**

**Tel.: (916) 654-1888**

## **5. Why is the IPP so important?**

The IPP is important because it authorizes your services and supports. The IPP is a contract between you and the regional center. It is an agreement to

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<sup>10</sup> Publication number 5038.01.

<sup>11</sup> Publication number 5122.01.

provide services and supports.<sup>12</sup> If there is a service or support you need and want, including services or supports from other agencies, you *must* ask that it be written in the IPP.

Whenever you need services and supports, ask your regional center for an IPP meeting.<sup>13</sup> *Every* service or support should be listed, including services from a “generic agency.”<sup>14</sup>

### ***Remember!***

- If a service **is listed** in your IPP, the regional center **must** provide it or help you get it or keep getting it from another agency.<sup>15</sup>
- If a service **is NOT listed** in your IPP, the regional center does not have to give it to you or help you get it from another agency!

## **6. Who makes the IPP?**

The planning team (the people at your IPP meeting) say what goes in your IPP. The IPP lists the services that you and the regional center agree on. The IPP meeting should not be adversarial. The IPP process is collaborative.<sup>16</sup>

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<sup>12</sup> “The rights of developmentally disabled persons and the obligations of the state toward them are implemented through individual program plans (IPP) which regional centers must develop for each client.” *Clemente v. Amundson*, 60 Cal.App.4th 1094 (1998) (citing §§ 4646, 4647; *ARC v. DDS*, *supra*, 390).

<sup>13</sup> See *In the Matter of M.B. v. Redwood Coast Regional Center*, OAH Case No. 2001120531, where the Administrative Law Judge determined: “[W]hen claimant’s request for services was presented to her service coordinator, he should have convened the planning team.”

<sup>14</sup> § 4646.5(a)(4). 4646.5(a)(4). A generic agency provides services and benefits to people generally whether or not they are regional center clients. § 4644(b). Examples of generic agencies and services are the Medi-Cal or Medicare programs for health care, California Children’s Services or CCS for health care related to a physical disability, school districts for services provided through a special education program, Social Security Administration for SSI or Social Security Disability benefits.

<sup>15</sup> § 4648.

<sup>16</sup> “The Legislature envisioned the IPP process as being collaborative. During the process, interested parties gather information about the consumer from as many sources as possible, evaluate that information, conceive a plan by which the individual’s needs of the consumer could be addressed, and express that plan in terms which allow for efficient evaluation of the effectiveness of the plan.” *Alejandra R. v. Eastern Los Angeles Regional Center*, OAH Case No. L-2003010445 and L-2003040204.

You, your circle of support, and the regional center work together to come up with ways for you to achieve your goals and dreams. You get to say what your hopes, dreams and challenges are. And the regional center brings its experience and knowledge of the services and supports that are available in your community.

After the IPP meeting, the service coordinator at the regional center will give you a copy of your IPP.<sup>17</sup>

## **7. What is an IPP Planning Team?**

The IPP planning team is a group of people who work together to make an IPP that is right for you.<sup>18</sup> Together with you, they will make decisions on services and supports, and who will provide the services and supports you need. These decisions must be made *at the meeting* by the planning team. The decisions will become the agreement between you (and your representative or family, if appropriate) and the regional center.

Supplement J can help you remember the steps to making your IPP.

## **8. Who is on the IPP Planning Team?**

Your IPP planning team includes:

- You
- Someone to represent you, if appropriate
- Your parents or guardian if you are a child under 18 (or a conservator if the court has appointed a conservator to speak for you).
- Your relatives can be there, if you want them. (If you cannot speak, you may also want a family member there to communicate what you want.)
- Anyone else you want to have at the meeting including someone from a program you attend or from where you live.

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<sup>17</sup> “The service coordinator is the person responsible for preparing, over-seeing, monitoring, and implementing the IPP.” See *M.B. v. Redwood Coast Regional Center*, OAH Case No. 2001120531 (citing § 4647(a)&(b)).

<sup>18</sup> For definition of planning team see § 4512(j). Decisions about the services and supports to be written into the IPP must be made by the planning team members. § 4646(d).

- Someone from the regional center, including your service coordinator, and someone who can say “yes” or “no” (a decision maker) when you ask for something to be written into the IPP. (See Question 23 below.)
- If you live in a developmental center, the developmental center staff will also be there.<sup>19</sup>

**9. I want my neighbor to be at my IPP meeting but she cannot come in person. Can she participate by phone?**

Yes, your neighbor, or anyone else you choose, can participate by phone. Ask the regional center to make sure there is a telephone with a “speaker” so that your neighbor can hear what people say at your IPP meeting and the people at the IPP meeting can hear what your neighbor says. Ask your service coordinator to mail your neighbor your last IPP and any amendments along with anything else the service coordinator will be bringing to the IPP meeting.

When you call your service coordinator, you can say: “I want my neighbor, Mrs. Hill, to be at the meeting. She works and cannot be there in person. Would you mail or fax her my last IPP and a copy of the papers you are bringing to the meeting so she can participate by phone.”

**10. What does it mean to “identify and build circles of support”?**

A “circle of support” includes your family, friends and other people in your life who volunteer to meet with you regularly. Their goal is to listen to you, share their experiences and help you become independent and involved with your community. Solving problems is easier if you know you have the support and assistance of neighbors and friends. A circle of support is one of a number of “natural supports” that the regional center can help you start.<sup>20</sup>

Natural supports are people who are part of your community. They are your family, neighbors, co-workers, friends, fellow students or co-workers, and

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<sup>19</sup> § 4418.3(b).

<sup>20</sup> § 4512(f).

members of organizations, clubs, and civic organizations you associate with or belong to.<sup>21</sup>

The regional center cannot make your natural supports help you. And, they cannot stop or deny a service because a natural support could help you, unless that person agreed to help and started to do so.

### **11. Where will the IPP meeting be?**

Your IPP can be any place that is easy for you to get to. It should be at a time that is convenient for you.<sup>22</sup> Often, the meeting takes place where you live. Sometimes the IPP meeting takes place at a day program or at your regional center.

### **12. Sometimes I misplace things that are sent to me. Will the regional center send notices to someone else too?**

Yes. You can ask your regional center service coordinator to:

- Send notices about IPP meetings – and any other notices about your services – to you and someone you want to help you, including a parent or family member, advocates or friends.<sup>23</sup>
- Call you or tell you in person about IPP meetings. If you want a written notice, we recommend that you write your regional center and ask them to send all future IPP meeting notices to you and the person you designate.

### **13. The regional center just told me I am eligible for regional center services. When do I get my first IPP?**

Your written IPP must be completed within 60 days after your intake and assessment.<sup>24</sup> That means you will have your IPP meeting and your written IPP document will be completed within a 60-day period. Sometimes – especially when it is your first IPP – you will have more than one meeting.

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<sup>21</sup> § 4512(e).

<sup>22</sup> § 4646(a).

<sup>23</sup> § 4646(e).

<sup>24</sup> § 4646(c).

You will have to start early to make sure the final IPP will be completed and services started within 60 days.

If you have not heard from the regional center about your IPP meeting date within 2-3 weeks of being told you are a regional center client, call the regional center and ask when the IPP meeting will be held. If you do not know the name of your service coordinator, the regional center operator will be able to tell you. Or, ask to speak with the regional center person who helped you during the intake process.

#### **14. How often are IPP meetings required?**

Every consumer's IPP *must* be reviewed and modified at least once **every 3 years**. You may have it reviewed or modified more often, if you desire. Many consumers change their IPP as their needs and achievements change.<sup>25</sup>

If you receive services through the Medi-Cal Home and Community-Based Waiver,<sup>26</sup> or if you live in a group home or an Intermediate Care Facility (ICF/DD) or a developmental center,<sup>27</sup> you must have an IPP meeting **every year** to review your IPP.

You and someone you designate have the right to receive written notice of all IPP meetings and any changes in services or appeals. (See *Question 13 above*.)<sup>28</sup>

#### **15. Can I ask for an IPP meeting at any time to change my supports?**

Yes. You can have an IPP meeting whenever you think you need one because you want to change your services and supports. The planning meeting must take place within **30 days** of your request to review your IPP.<sup>29</sup>

You can use the sample request letter in Supplement N, at the end of this book.

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<sup>25</sup> § 4646.5(b).

<sup>26</sup> For more information about the Medi-Cal Home and Community-Based Waiver, see Chapter 1, Questions 22 and 23; Supplement D.

<sup>27</sup> For more information about Intermediate Care Facilities, see Chapter 7, Question 28.

<sup>28</sup> § 4646.5(e).

<sup>29</sup> § 4646.5(b).

## **16. Can I ask someone to help me in my IPP meeting or can someone be appointed to help me?**

Yes. If you are an adult (18 years or older) and do not already have a conservator appointed by a court, you may tell the planning team that you want to name someone to help you and speak for you. This person will be your authorized representative.

Disability Rights California does not recommend this. Instead, you can invite someone to be with you at the IPP, but not appoint them to speak for you.

In some situations, you may want to ask the Area Board to appoint an authorized representative to speak for you. The authorized representative will help you express your needs and choices and make decisions.

If you cannot ask for yourself, someone may ask for you. You may ask for a particular person to be appointed, such as a family member or friend. If you do not ask for a particular person, the Area Board can appoint a family member or a volunteer if they have one available. Area Boards must have people available to be appointed representatives for you if you live in a developmental center and it is proposed that you move to the community.<sup>30</sup>

Supplement AA has a list of Area Boards.

## **17. How can I participate in my IPP if I do not talk?**

There are many different ways of communicating. People can give and get information without speaking. Many people use signs or communication devices, others can point, some are able to nod or blink “yes” or “no.” People who cannot say “yes-no” can still communicate about what they like and do not like. They may indicate what they like by being relaxed, smiling, making happy or contented sounds. They may signal what they do not like by being tense, agitated, crying, or other signs of distress such as an increase in seizures.

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<sup>30</sup> § 4548.

Because the IPP is person-centered, extra preparation may be required before the IPP meeting to ensure your maximum participation and that the IPP will reflect your choices.

You are entitled to an interpreter or facilitation if those services will help you participate in your IPP meeting.<sup>31</sup> Facilitation means that you can have information presented in a way that you understand. You can have special equipment or an assistant so you can understand the information and be able to make decisions and choices that affect your life.<sup>32</sup> If there are communication difficulties, it may be especially important to have several people present who know you well and know your likes and dislikes. These people can help make sure that what gets written into the IPP is what you really want.

## **18. What if I do not speak English?**

Good communication is essential. If you do not speak English, have difficulty understanding English, or feel more comfortable speaking in a different language, tell the regional center when you schedule the intake meeting. They must provide an interpreter for the meeting.

You can have an interpreter at every meeting, if you need one, including the intake meeting. You may also want to bring along a friend or family member who speaks English to help you. But, the regional center cannot require you to bring a friend to be your interpreter. The law gives you the right to:

- Get translations of your IPP and other documents, and
- Have an interpreter for meetings or phone conversations.<sup>33</sup>

Let the regional center know you need an interpreter as soon as possible. Supplement T at the end of this book shows you how to ask your regional center for an interpreter.

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<sup>31</sup> § 4512(b).

<sup>32</sup> § 4512(g).

<sup>33</sup> Government Code §§ 7290 *et seq.*, §§ 11435.05, 11435.15, 11435.25(b); Welf. & Inst. Code §§ 4502.1, 4646, 4646.5(a)(1), 4701 *et seq.*; Cal. Code Regs., tit. 22, §§ 98210(a), (c), (d), 98211(c).

If your regional center will not translate documents or give you an interpreter, call Disability Rights California or OCRA for help.

### **19. What if I am worried about keeping track of everything that happens at my IPP meeting?**

There are things you can do to help you keep track of what happens at the meeting, including:

- Bring someone with you to help take notes and help you follow what is going on.
- Prepare before the meeting. (See the IPP Meeting Planner in Supplement J.)
- Ask the regional center to bring an easel with large sheets of paper, markers and masking tape. Ask someone at the meeting to write down notes on the large sheets of paper and tape the sheets of paper to the wall so that everyone can see the notes of the meeting.
- If you have assessments or reports that you think will help you receive the services you are requesting, bring copies to your meeting.

### **20. Can I record my IPP meeting?**

Yes. You, or your representative, can make a sound recording of your IPP meeting. But you must tell the regional center at least 24 hours before the meeting. You must also bring your own recorder. The regional center does not have to give you recording equipment.<sup>34</sup>

### **21. Can the regional center record my IPP meeting?**

Maybe. If you decide to record the meeting, the regional center may also make their own recording of the meeting.

If the regional center wants to record your IPP meeting but you disagree, you have the right to say that you will not go to the meeting if it is going to be

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<sup>34</sup> § 4646.6

recorded. If you tell them you object, they are *not* allowed to record the meeting.<sup>35</sup>

## **22. What happens first at an IPP meeting?**

The first step in the planning process is gathering information and, if necessary, conducting assessments.<sup>36</sup> The information and assessments will help determine your life goals, your capabilities and strengths, your preferences, barriers to achieving your goals, and other concerns or problems. This process helps the IPP team list your goals and objectives.

For children, a review of the strengths, preferences, and needs of the family unit as a whole are included. Information must be taken from you, your family and friends, advocates, service providers and others so that a full picture is available.<sup>37</sup>

Often, no formal assessments are conducted. Instead, the information is gathered at the team meeting. Make sure that enough time is spent during the first part of the meeting to understand the information about you and identify your goals, your strengths, capabilities and preferences, and the barriers to achieving your goals.

Disability Rights California recommends using an easel and large sheets of paper to write down notes. (*See Question 20 above.*)

Starting July 1, 2011, the regional center will also ask you for a copy of your health insurance card. This includes private health insurance coverage, health service plans, Medi-Cal, Medicare, and TRICARE cards. Remember, if you do not have health coverage, the regional center cannot use that fact to deny or reduce your services.

At each annual IPP, the regional center should give each family subject to the Annual Family Program Fee a form and an envelope to mail payment to DDS. (*See Chapter 1 Questions 23 and 33 -38*)

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<sup>35</sup> § 4646.6

<sup>36</sup> § 4646.5(a)(1). "The IPP must include the following: an assessment of the client's capabilities and problems." *ARC v. DDS*, supra, 384, 390.

<sup>37</sup> § 4646.5(a)(1).

### **23. Can a regional center decide that it needs an assessment before writing my IPP?**

Yes. For people who need and want certain kinds of services or supports, formal assessments may be done before the team meeting or between a first and second meeting. Assessments are often done when the consumer may need:

- behavior management services,
- occupational and/or physical therapy, or
- supported living.

Assessments must be done by someone who is qualified. Whenever possible, the assessment should take place in the natural environment.<sup>38</sup>

### **24. What if the person from the regional center says he or she does not have the authority to make a decision?**

The law says that there **must** be someone at your IPP meeting who can make decisions on behalf of the regional center. In fact, the decisions about your services and supports must be made by someone who is **at** the meeting.<sup>39</sup> That person may be the service coordinator, a supervisor or other administrator. You have the right to speak directly with the people from the regional center who make decisions about your services.

If the regional center “decision maker” is **not** present at your initial IPP meeting, the law allows the regional center to have the decision maker come to a second meeting within 15 days (unless you or your representative, parent(s), guardian or conservator agree to a longer time).<sup>40</sup>

If a regional center says that a Purchase of Service (POS) or other committee must make final decisions about the services and supports before the regional center will agree to put the service in your IPP, you can object. **You should not** agree to an IPP that just “recommends funding” for a particular

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<sup>38</sup> § 4646.5(a).

<sup>39</sup> § 4646(d).

<sup>40</sup> § 4646(f).

service saying that the final decision will be made later by the regional center. Final decisions on your IPP should be made at this meeting. Although the regional center may discuss your service needs at an internal meeting, after the meeting, and within 15 days, a representative of the regional center (perhaps from the committee) must meet with you directly to discuss your goals and the services you need.<sup>41</sup>

It is a good idea to tell your service coordinator before the IPP meeting what you would like to discuss in the planning team meeting. That way the people from the regional center will know about the decisions to be made at the meeting and the regional center staff with authority to make decisions on those services can be present.

You can use the sample request letter in Supplement N, at the end of this book.

## **25. What if I need more than one meeting to develop my IPP?**

If you have complex needs or if an assessment is needed to help determine the services and supports you want and need, you may need more than one meeting to come to agreement with the regional center on your IPP.

You and the regional center can continue to meet as often as you agree to in order to write your IPP.

## **26. What should be written in the IPP?**

The IPP must contain:

- a statement of your goals and objectives,
- a list of the types and amounts of services and supports you need, and
- a schedule for review and evaluation of your IPP.<sup>42</sup>

## **27. Statement of goals and objectives**

The goals in your IPP must be based upon your needs, preferences, and life choices. Your IPP must also contain specific, time-limited objectives for

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<sup>41</sup> § 4646(d).

<sup>42</sup> §§ 4646.5(a)(2)-(5).

reaching your goals and addressing your needs. The IPP must state objectives in clear terms so that you and the regional center can measure progress or monitor service delivery.

Goals and objectives should set out many possible ways for you to:

- Make friends and develop relationships with peers;
- Have a job, live in the community, go to school, and have activities that you enjoy;
- Make decisions about where, with whom, and how you want to live;
- Be a part of your community by doing things like joining a recreation group, a People First chapter, or a local committee;
- Learn skills such as handling your money, cooking, and using the bus; and
- Get the help you and your family need, such as respite, day care, and behavior services.

### **List of Types and Amounts of Services and Supports**

The IPP must list the types and amounts of services and supports the regional center will purchase itself or obtain from generic agencies. It must describe other resources you need to meet your IPP objectives. It must identify any steps needed to get services started. It should identify service providers such as vendors, contractors, generic service agencies and natural supports.

You (and when appropriate, your parents, legal guardian, or conservator) must have a say in selecting providers. This list of services and supports should not be written as a request for approval from another committee. You are entitled to receive the services and supports listed in your IPP.

It is important to make the IPP as complete as possible so that if the regional center decides to stop or reduce services, the IPP will show why you need those services. A complete and detailed IPP also reduces misunderstandings about what services and supports you are entitled to receive and should be receiving.

## Schedule of Review

Your IPP must contain a schedule for regular, periodic review and reevaluation. Reviews show if you are receiving the services listed, if you have met the IPP objectives, and if you are satisfied with the IPP and its implementation.

### 28. What is the difference between a “goal” and an “objective”?

Your IPP must have a statement of your goals, based on your needs, preferences and choices.<sup>43</sup>

**A goal** is a broad statement about where you would like to live, what recreational activities you would like to participate in or what kind of job you would like to have.<sup>44</sup> A goal can be something in your life that you would like to change. For example, if you do not have a job, but would like to have one, your goal may be “I will get a job.” A goal may be something in your life that you would like to continue. For example, your goal may be “I will continue my job.” It may take some time to reach your goals. In order to reach your goals, you can break your goals into smaller steps or objectives.

**Objectives** are specific and time-limited activities that help you reach your goals.<sup>45</sup> Objectives must be written in your IPP in a way that allows measurement of progress or monitoring of service delivery. For example, if your goal is to get a job in your neighborhood, one of your objectives might be: “Each week for the next three weeks, I will, with support, pick up job applications from nearby businesses.”

Your goals and objectives should maximize your opportunities to develop relationships and be part of your community life in areas such as housing, work, school, and leisure.

### 29. How do I decide which services or supports to ask for in my IPP?

Under the Lanterman Act, the phrase “services and supports for people with developmental disabilities” covers a wide range. It includes services and

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<sup>43</sup> § 4645(a)(2).

<sup>44</sup> §§ 4502(j), 4645(a)(2).

<sup>45</sup> § 4645(a)(2).

supports to lessen the effects of developmental disabilities and to help people with developmental disabilities achieve and maintain independent, productive, and normal lives.<sup>46</sup>

You must figure out what you (and your family, if appropriate) want and need. The IPP can help you select the services and supports you need and prefer. The services you select must be cost-effective.<sup>47</sup> *All of the services and supports you will receive must be listed in your IPP.*

Here are some examples of services:

- Assessment Services
- Habilitation and training
- Treatment and therapy intervention
- Preventative Services
- An array of different living arrangements
- Community Integration
- Employment/Day Programs
- Advocacy
- Family Support Services
- Relationship services and supports
- Emergency and crisis services
- Specialized Equipment
- Transportation Services
- Facilitation/Self-Advocacy
- Interpreter/Translator Services

The list gives you ideas about what kinds of things are available. The list does not include all of the services that should be available, but it is a good starting point.

You can make a list of the things you want and need, and compare it to the list in Supplement C, which is a complete list of services and supports covered by the Lanterman Act.

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<sup>46</sup> § 4512(b).

<sup>47</sup> § 4646.

See Supplement D for services available through the DD Waiver.

Use the IPP planners in Supplements J, K and L to help you figure out what to ask for at the IPP.

There may be many different services that can accomplish the same result, so do not worry about labels. Think about what results you want from a service or support. To prepare for an IPP meeting, make a list of your likes and dislikes, wants and needs. Then make a list of the services you think will help you meet your needs. If you have had a life quality assessment, the results will help you plan for your IPP. See Question 10 above for more information about life quality assessments. It is a good idea to write a letter to your service coordinator telling him or her which services and supports you will be requesting. Use the sample letter in Supplement N.

For services available to those living with their families, see Chapter 6. For supports for living arrangements for adults, see Chapter 7. For a more detailed discussion of work, day and leisure supports and services, see Chapter 8.

**30. Does the IPP include information about my health and health care needs?**

Yes. The IPP team, with the consent of the consumer, parents or legal guardians, may review the consumer's general health status at the IPP meeting.<sup>48</sup> This review can include medical, dental and mental health needs. It can also include a discussion of your current medications, any observed side effects, and the date of the last medications review. If there are any concerns, you should be referred to the regional center's clinical staff and/or to your treating physician. Service coordinators must document your health status and any referrals in your record.

**31. Can I get special equipment or assistive technology through the IPP?**

Maybe. Ask for the special equipment or assistive technology you need at your IPP meeting. The regional center must help you get the equipment you need from a generic agency, such as:

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<sup>48</sup> § 4646.5(a)(5).

- California Children’s Services,
- Medi-Cal,
- private insurance,
- California Department of Rehabilitation, or
- your local school district.

If there will be a delay, the regional center must pay for the special equipment or assistive technology in the meantime.<sup>49</sup> If there is no other generic agency that can pay for it, the regional center must pay for the equipment.<sup>50</sup>

Make sure your IPP includes time lines and identifies who will help you get assistive technology.

### **32. What kinds of special equipment or assistive technology can I get?**

Special equipment and assistive technology include:

- communication devices,
- hospital beds,
- wheelchairs,
- ramps to get in and out of your home,
- special hinges to make doors wider for a wheelchair,

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<sup>49</sup> In at least one case, a California superior court upheld an administrative hearing decision ordering the regional center to provide educational services during a dispute with the school district. In the ruling, the judge noted that the regional center “is obligated to provide services which meet each disabled person’s needs and fill in gaps of services available from other agencies” (emphasis added). The judge also found that “the Legislature intended to permit use of regional center’s funds to provide services which other agencies fail to provide even though they may be ordinarily responsible.” See *T.S. v. North Los Angeles County Regional Center*, OAH Case No. L-2002070084, implemented via a writ of mandate (Code Civ. Proc. § 1085) in *T.S. v. Clifford Allenby et al.*, Los Angeles Superior Ct Case No. BS 079835. For example, if Medi-Cal denies authorization for a wheelchair, the regional center can authorize payment for the wheelchair while assisting the regional center client in appealing the denial from Medi-Cal (the generic agency). See § 4648(b). If on appeal the wheelchair is authorized, the provider is obligated to reimburse the regional center. § 14019.3(e).

<sup>50</sup> §§ 4659, 4648(g).

- computers, and
- other devices and technology to help you lead a more normal and productive life.

For more information about special equipment and assistive technology, ask Disability Rights California for publication number 5320.01, *Accessing Assistive Technology*.

Or download it from: [www.pai-ca.org/PUBS/532001.pdf](http://www.pai-ca.org/PUBS/532001.pdf).

### **33. Can a regional center refuse to write a service or support into my IPP based on its own Purchase-of-Service policy?**

The Lanterman Act entitles every person with a developmental disability, on an *individual* basis, to the services and supports you choose and need to live an independent and productive life in the community.<sup>51</sup> A regional center may not apply *general* policies that prevent you from getting services based on what you want and need.<sup>52</sup> Each regional center does, however, have its own policies, which are used as guidelines for purchasing services and supports for consumers. These Purchase-of-Service (POS) policies usually explain the requirements for receiving a service and sometimes set limits on the amount or frequency of the service. The policies vary from regional center to regional center. DDS must review and approve all regional center POS policies.<sup>53</sup>

Since the amount and type of services a person receives is to be decided individually at his/her IPP meeting, POS policies **cannot** forbid the purchase of certain types of services (such as in-home nursing) or set strict limits on the amount of a service (such as hours of day care assistance) that you can

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<sup>51</sup> §§ 4500.5, 4501, 4502.

<sup>52</sup> See *Williams v. Macomber*, 226 Cal.App.3d 225 (1990) in which the State Appellate Court ruled that the denial of home day-care services on the basis of a general policy of denying such services to minors with working parents violates the Lanterman Act's requirement that services to be provided for each consumer must be selected "on an individual basis." The Court said that "the Regional Center's reliance on a fixed policy is inconsistent with the Act's stated purpose of providing services 'sufficiently complete to meet the needs of each person with developmental disabilities' (§ 4501)." *Williams*, 226 Cal.App.3d 225, 232 (emphasis added).

<sup>53</sup> § 4434(d).

demonstrate you need and prefer. Every POS policy must have an exception for individual circumstances. Unfortunately, regional centers do not always make this clear. If your regional center service coordinator tells you the support you want is beyond what the regional center provides under its POS policy, ask for a copy of the policy and for the exception policy. You can appeal if you believe you need particular services or supports from the regional center despite the POS policy.

For example, a regional center policy that limits independent living skills (ILS) training to a maximum of two years violates the Lanterman Act's requirement that the regional center provide services based on your individual needs. A policy with these limits cannot be used to deny a service if you can show that you need and will benefit from more ILS training. For the same reason, a policy that does not allow the purchase of in-home nursing respite for children who depend on a respirator would also be against the law.

Some regional centers have mainly fair POS policies. Others do not. The decision about what services or supports you need must be made in the IPP planning process and must be based on your individual needs.<sup>54</sup> If you are denied a service because of a POS policy that sets unfair limits, you can file an appeal. You can also file a complaint to challenge the policy itself as having an illegal cap on services. You will find more information on appeals and "Section 4731 Complaints" in Chapter 12.

#### **34. Can a regional center refuse to provide a service or support because it does not have enough money?**

Funds are always limited, but a regional center must base its decisions about which services and supports to provide based on your choices and needs<sup>55</sup>. The California Supreme Court has said that the Lanterman Act entitles all people with developmental disabilities to the services and supports they

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<sup>54</sup> § 4646.

<sup>55</sup> Under the 2009 revisions to the Lanterman Act, regional centers are required to purchase services from the least costly available provider of comparable service. However, the services must still meet your needs and must be decided upon through the IPP process. See Chapter 6 for more information.

choose and need to lead more independent and productive lives.<sup>56</sup> As long as it has any funds to purchase services, the regional center must provide services and supports based on your individual needs and preferences, as determined through the IPP process. The California Supreme Court has ruled that regional centers have wide discretion in determining *how* to implement an IPP. But, they have no discretion at all in determining *whether* to implement it. In other words, they must do what your IPP says. You can request a fair hearing if the regional center denies or reduces your services or supports because of lack of money.

If the regional center says it cannot provide (or must stop or cut back) a service or support that is in your IPP, you must get proper written notice. The regional center must also notify DDS in writing within **30 days** of the date it notified you of its decision. The regional center must describe the service and the expected cost. The regional center must request that DDS provide the regional center, **within 30 days**, with enough money to cover the cost to the end of the fiscal year.<sup>57</sup>

### **35. What is “cost-effectiveness” and how does it affect the IPP process?**

Parts of the Lanterman Act say that regional center services must be cost-effective in achieving your goals and implementing your IPP.<sup>58</sup> **This means that the regional center must deliver the services and supports you choose and need so that you get the best results for the money spent.**<sup>59</sup> The regional center must choose the least costly provider who meets your needs as identified in your IPP<sup>60</sup> when choosing among providers who deliver the same services of comparable quality. But it cannot make cost the *only* factor when deciding whether to provide a needed service to you. The regional center cannot deny a *type* of service because they believe it is not cost-effective. For example, the regional center may **not** deny you supported

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<sup>56</sup> Association for Retarded Citizens v. DDS, 38 Cal.3d 384 (1985).

<sup>57</sup> §§ 4710(c), (d).

<sup>58</sup> §§ 4512(b), 4646(a), 4648(a)(1)(6), 4651(a), and 4685(c)(3).

<sup>59</sup> Cal. Code Regs., tit. 17 § 58501(a)(6).

<sup>60</sup> §4648(a)(6)(D)

living services because it says you could live in a group home more cheaply. Cost effective service does not mean the cheapest service.

**36. Should the IPP say if the regional center is going to help me get services from another agency?**

Yes. If a generic agency can provide a service you need, regional centers are required to help you get those services before they pay for the services themselves.<sup>61</sup> Sometimes the regional center refers consumers to generic agencies without making sure that the needed services are available or that the services will really meet your needs. The regional center is responsible for advocating for you to make sure that the services you need are really available from another agency.<sup>62</sup> The regional center should also make sure that no gaps occur in the provision of needed services.<sup>63</sup>

If a public agency or private business refuses to pay for a service or support that you need immediately (and it would otherwise be a regional center responsibility) the regional center must pay for the service until the responsible party agrees to pay.<sup>64</sup> Because of this, it is important that the IPP say whether the regional center is going to help you get the services you need from another agency.

**37. What happens to my IPP if I move to an area with a different regional center?**

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<sup>61</sup> § 4648(a)(8).

<sup>62</sup> § 4648(b).

<sup>63</sup> The Lanterman Act provides: “[t]he complexities of providing services and supports to persons with developmental disabilities requires the coordination of services of many state departments and community agencies to ensure that no gaps occur in communication or provision of services and supports.” § 4501 (emphasis added).

<sup>64</sup> Once services and supports are identified in the IPP, the regional center must secure the needed services and supports. § 4648(a) and § 4640.7 and *ARC v. DDS*, supra, 384, 388, 390. Service coordination provided by the regional center includes “... securing, through purchasing or by obtaining from generic agencies or other resources, services and supports specified in the person’s individual program plan...”§ 4647(a).

When you move, the new regional center must follow the IPP developed at your former regional center until a new IPP is developed.<sup>65</sup>

If any of the services and supports written into your IPP are not available in the new regional center's area, the regional center must set up an IPP meeting within 30 days.<sup>66</sup> Meanwhile, the new regional center will provide alternative services that best meet your needs.<sup>67</sup>

DDS has guidelines that describe how regional centers must make your transition to the new regional center smooth, and make sure that there are no delays or gaps in your services and supports.

For more information about transferring from one regional center to another, see Supplement H and Chapter 3, Questions 19 through 21.

### **38. Do I have the same rights at all meetings with the regional center that I have at an IPP meeting?**

In Disability Rights California's opinion, yes. Regional centers sometimes hold "ID team meetings," "informal IPPs," or "annual reviews" that the regional center may not consider to be IPP meetings. Sometimes the regional center will say that agreements reached at these meetings are not formal agreements and do not have to be followed.

Disability Rights California believes that any meeting at which regional center staff meets with you and/or your family to discuss services and supports is *actually an IPP meeting*. This means that a decision maker must be present, the agreements you make must be followed, and you must be able to sign the IPP amendment including a written confirmation of your agreement. If the regional center wants to change or terminate one of your services, always

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<sup>65</sup> "Whenever a consumer transfers from one regional center catchment area to another, the level and types of services and supports specified in the consumer's individual program plan shall be authorized and secured, if available, pending the development of a new individual program plan." § 4643.5(c).

<sup>66</sup> § 4643.5(c).

<sup>67</sup> "Prior to approval of the new individual program plan, the [new] regional center shall provide alternative services and supports that best meet the individual program plan objectives in the least restrictive setting." § 4643(c).

ask them to put it in writing before you agree to it. This way you will be able to see exactly what they are proposing and will be better informed as you decide whether or not to agree to what the regional center proposes.

Read Supplement I at the end of this book to make sure your rights are protected at all meetings.

### **39. Will the IPP process be different if I live in a Developmental Center?**

No. IPP requirements are the same regardless of where you live. If you live in a Developmental Center (DC), however, it is the DC staff, rather than regional center staff, who are responsible for coordinating the planning team process.

Even though you live in a DC, the regional center must continue to participate in the IPP process. Planning teams must include one or more regional center representatives.<sup>68</sup> Regional center participation is particularly important because regional center staff are more likely to be familiar with community services and supports that would enable you to move back to the community. The Lanterman Act specifically emphasizes the importance of coordinating with regional centers, as well as regional resource development projects, in the process of transitioning people to the community.<sup>69</sup>

It has been Disability Rights California's experience that regional center representatives frequently do not attend IPP meetings for consumers in DCs. Because they are required members of the team, and because less restrictive alternatives should always be a focus of the IPP process for DC residents, you should insist that your regional center participate, preferably in person, at all of your planning team meetings.

### **40. What if the planning team cannot agree on my IPP?**

If the planning team is unable to agree on the services and supports that will be in your IPP after one or more meetings, or if you can get no answer to your request for services, you can ask for a fair hearing.

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<sup>68</sup> § 4512(j).

<sup>69</sup> § 4418.3.

See Chapter 12 for more information about the fair hearing procedures of the Lanterman Act.

#### **41. Why should I sign my IPP?**

You or your representative (or your parents, guardian or conservator, if applicable) must sign the IPP so it can go into effect.<sup>70</sup> If you agree on some things but not on others, you should write down which things you agree on and which you do not agree on. Then sign the IPP so that the agreed-upon services and supports can go into effect. You can appeal any disagreement through the fair hearing procedure. The matters you do agree on should go into effect by the date you have determined at the meeting.

#### **42. What happens if I disagree with just one part of the IPP?**

If the regional center refuses to authorize a new service that you have requested, it must send you a written notice within **5 days** after the IPP meeting.<sup>71</sup> If the regional center says it wants to change or end a service you are already getting, it must give you written notice **30 days in advance** of the change or cut-off.<sup>72</sup> The notice must include the action that the regional center intends to take, the reason, the effective date, the law supporting the action, and information on how to appeal the decision, including referrals to advocacy assistance.<sup>73</sup>

See Chapter 12 on Disputes and Appeals.

#### **43. Can the regional center make changes in my IPP without my agreement?**

Yes, but there are certain things the regional center must do before it makes a change:

- The regional center must discuss any changes it wants to make to your IPP *at an IPP meeting*.

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<sup>70</sup> § 4646(g).

<sup>71</sup> § 4710(b).

<sup>72</sup> § 4710(a).

<sup>73</sup> § 4701.

- After the meeting, if the regional center still wants to stop or change a service, it must notify you in writing that it intends to do so.
- The regional center must notify you *in writing* at least **30 days** before reducing, terminating, or changing services in your IPP.<sup>74</sup>

If you disagree with the proposal to change or stop a service, you can file an appeal. (See *Chapter 12*.) To make sure the service is provided until the appeal is decided, you must file your appeal within **10 days** from the date you get the notice in the mail.<sup>75</sup> This is called “*Aid Paid Pending*.”

You have **30 days** to appeal from the date any change is proposed or made in your IPP, but to have a service continue until the appeal is heard you must appeal within **10 days**.<sup>76</sup>

#### **44. Does the regional center have to make my IPP work?**

The regional center must do several things to make your IPP work, including:

- *Get* the services and supports identified in your IPP. (Be specific about what services and supports you want and need.)<sup>77</sup>
- *Advocate* for your legal, civil and service rights.<sup>78</sup> (See *Question 47 below*.)
- *Identify and build* a Circle of Support for you.<sup>79</sup>
- *Ensure* the quality of the services you receive.<sup>80</sup>
- *Develop* new programs, if what you need does not exist or is not available now.<sup>81</sup>

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<sup>74</sup> § 4710(a).

<sup>75</sup> § 4701(n).

<sup>76</sup> § 4710.5(a).

<sup>77</sup> §§ 4648(a), 4646.5(a)(2).

<sup>78</sup> §§ 4648(b), 4512(b).

<sup>79</sup> § 4648(c).

<sup>80</sup> § 4648(d).

<sup>81</sup> § 4648(e).

## 45. How does the regional center make sure I get the services and supports in my IPP?

Once you and the regional center agree on the services and supports you need, the regional center must get them for you. It can do that in many ways, including:

### Obtain Services from Generic Agencies

The regional center can help you get services from another agency that provides services to the public, such as the public school, Medi-Cal or IHSS. These agencies are called “generic agencies.”<sup>82</sup> If a generic agency can provide a service you need, regional centers are required to help you get that service before they pay for the service.<sup>83</sup> This is a good idea, but in practice it can cause problems. Sometimes the regional center refers consumers to generic agencies without making sure the needed services are available or that they will meet your needs. The regional center is responsible for advocating for you to make sure that the services you are eligible for from another agency are actually provided. (See *Question 47 below*.)<sup>84</sup>

The regional center should make sure there are no gaps in the services provided.<sup>85</sup> If a public agency or private business refuses to pay for a service or support that you need immediately (and it would otherwise be a regional center responsibility) the regional center must pay for it until the responsible party agrees to pay.<sup>86</sup>

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<sup>82</sup> §§ 4640.7(a), 4647(a).

<sup>83</sup> § 4648(a)(8).

<sup>84</sup> § 4648(b).

<sup>85</sup> Under the Lanterman Act, the State of California accepts a responsibility for people with developmental disabilities and an obligation to them, which it must discharge. Furthermore, “[t]he complexities of providing services and supports to persons with developmental disabilities requires the coordination of services of many state departments and community agencies **to ensure that no gaps occur in communication or provision of services and supports.**” § 4501 (emphasis added).

<sup>86</sup> In at least one case, a California Superior Court has upheld an administrative hearing decision ordering the regional center to provide educational services during a dispute with the school district. In its ruling, the Superior Court Judge noted that the regional center “is obligated to provide services which meet each disabled person’s needs and *fill in gaps of*

## **Purchase Services and Supports from Service Providers (Vendors)**

The regional center can purchase services for you directly from a service provider. The regional center can go to a service provider, an agency, or an individual it already has an agreement with, or it can contract separately with a new agency or individual.<sup>87</sup> The regional center must find providers who can meet your needs.

## **Provide You With Vouchers**

The regional center can provide you with a “voucher” for the services or equipment that you need.<sup>88</sup> Vouchers are like payment coupons. The voucher lets you (or your family, where appropriate) select who will perform the service.<sup>89</sup> The regional center still has the responsibility of making sure that the service or item is available. (*See Question 46 below.*)

## **Develop Services If They Do Not Exist**

When it is necessary to expand the availability of needed services of good quality, a regional center can solicit an individual or an agency by “Request for Proposal” (RFP) or other means, to provide needed services or supports that are not currently available.<sup>90</sup>

## **Request for Funds**

Regional centers can request funds from the Program Development Fund or from community placement plan funds to reimburse the start-up costs that may be needed to start a new program or services and supports that you need.<sup>91</sup>

## **Use Creative/Innovative Means**

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services available from other agencies” (emphasis added). The Court also found that “the Legislature intended to permit use of regional center’s funds to provide services which other agencies fail to provide even though they may be ordinarily responsible.” *T.S. v. North Los Angeles County Regional Center*, OAH Case No. L-2002070084.

<sup>87</sup> § 4648(a)(3)(B).

<sup>88</sup> § 4648(a)(4).

<sup>89</sup> §§ 4512(i), 4648(a)(4).

<sup>90</sup> § 4648(e)(1).

<sup>91</sup> § 4648(e)(2).

Regional centers can use creative and innovative service delivery models, including, for example, natural supports, such as friends or relatives of the consumer.<sup>92</sup>

### **Provide Direct Treatment and Supports In an Emergency Situation**

Generally, regional centers cannot provide direct treatment and therapeutic services. Instead, they have to use appropriate public and private community agencies. But in an emergency situation, regional centers can provide direct treatment and therapeutic services.

### **DDS Can Provide Services Directly**

In order to meet your IPP goals in rare situations “where there are identified gaps in the system of services and supports or where there are identified consumers for whom no provider will provide services and supports contained in his or her individual program plan,” DDS may also provide the services and supports directly.<sup>93</sup>

### **Statement of Services and Supports**

At least once a year, your regional center will send to you, your parents, legal guardian, conservator, or authorized representative, a statement of services and supports that lets you know what the regional center purchased for you.<sup>94</sup> The statement of services and supports will include the type, unit, month and cost of services and supports that the regional center purchased for you. The statement provides only information and does not change or reduce what you are already receiving.

The reason the regional center is sending this statement to you is to make sure that you are actually getting the services and supports that the regional center is paying for you to get. If you receive the statement of services and supports from the regional center and see that you are not getting the services and supports that are being charged, be sure to let your regional center know.

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<sup>92</sup> § 4648(e)(3).

<sup>93</sup> § 4648(g).

<sup>94</sup> § 4648(h)

## 46. What do I need to know about vouchers?

Vouchers are one way of getting services. They are “coupons” that authorize you to pay someone to provide a service for you. There are vouchers for things such as respite, transportation services, day care, in-home nursing, and diapers.

The *advantage* of vouchers is:

You can use them to purchase services from any person or organization you choose and avoid agency waiting lists.

The *disadvantage* of vouchers is:

They make **you** responsible for finding a service provider.

By using a voucher you may be establishing an “employer-employee” relationship between you and your family and the person who is hired to provide the service.<sup>95</sup> Effective October 1, 2011, the voucher program for day care, nursing services, respite services, transportation, and community based training services will be changed. Instead of you receiving payment directly, you will be required to use a Financial Management Service (FMS) provider.<sup>96</sup> FMS providers help you by doing the general payroll and billing functions. There are two types of FMS providers. The FMS Fiscal/Employer Agent where you or your family is the sole employer and has independent authority to hire and fire workers or the FMS Co-Employer where you or your family has the authority only to make recommendations about the hiring and firing of workers.

FMS providers do the following duties:

- 1) Collect and process timesheet of the workers,
- 2) Assist your or your family in verifying the worker’s eligibility for employment,
- 3) Process payroll (including taking out for taxes),
- 4) Make monthly expenditure reports to you or your family member,

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<sup>95</sup> Cal. Code Regs., tit. 17 § 54355.

<sup>96</sup> Cal.Code Regs., tit. 17 §§ 54355, 58884 -58886

- 5) Maintain all records, and
- 6) Ensure that the payments do not exceed what was authorized by the regional center.

You or your family has the following duties:

- 1) Recruit workers and verify that they are qualified to do the job,
- 2) Develop qualifications based on your needs and preferences,
- 3) Determine worker duties,
- 4) Schedule and instruct the workers,
- 5) Supervise and evaluate the workers, and
- 6) Verify and approve the timesheets.

You should not have to pay for this service. The regional center should pay for the FMS provider. The transition to a FMS provider should not affect your services or the number of hours you receive.

The important thing is that the regional center cannot *make you* use vouchers instead of one of the other ways of securing services for you. This is particularly true if, because of your disability, you are not able to manage all of the additional work required.

#### **47. Can I choose who will provide my services and supports?**

You have an important voice in choosing your service provider, but it is not up to you alone. In deciding on a service provider, the planning team, including you and your family or advocate, if appropriate, must consider the following:

- Does the provider have the experience and ability needed to successfully help you meet your IPP objectives?
- Does the provider have the necessary license or certification?
- Can comparable services that meet your IPP needs be obtained at less cost from another provider?

- Has the provider you or your family wants to select been considered?<sup>97</sup>  
For a service to continue you must be satisfied with it and you must be making reasonable progress toward meeting the objectives in your IPP.<sup>98</sup>

You do not necessarily have a right to any provider you choose if others are available who can provide services that meet your needs at a lower cost. You will need to show the regional center that only the provider you choose can meet your needs, or that the provider you choose is the least costly. When calculating the costliness of a service, regional centers will include the cost of transportation to and from the service.

#### **48. What if the regional center agrees to a service but there is no provider available?**

Sometimes your planning team will agree that you need a particular service, but there is no provider available. This can be a serious problem. Although it can be difficult for the regional center, they must still use every possible means to fulfill your IPP.<sup>99</sup> They have some choice about how they will get the services listed in your IPP. And, you may need to insist they do everything possible to find a provider.

The regional center can look at these options:

- They can ask existing providers if they will provide the service you need, even if it is different from the services they usually provide.
- They can contract with different agencies to provide the services you need.
- They can send a “Request For Proposals” (RFP) to all of the provider organizations in the area to see if an agency is willing to develop new services.

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<sup>97</sup> § 4648(a)(6).

<sup>98</sup> § 4648(a)(7).

<sup>99</sup> Assoc. for Retarded Citizens-Calif. v. Dept. of Developmental Services, 38 Cal.3d 384, 388 (1985).

- They can see if a provider from a different area will be willing to come into your area and provide services for you.
- They can ask for funds from DDS in order to initiate and develop a new program of services and supports.<sup>100</sup>

See Question 43 above for the different ways regional centers can make sure you get the services and supports that are written in your IPP.

Regional centers are expected to have services available in the community where you live. However, it may take time to develop the services and in some instances no provider may be willing to develop the service in your area.

The regional center may ask you if you are willing to move to a different area where there is a provider of the services you need. That is often a very difficult thing to do. Sometimes this happens if you need a residential placement and there isn't one available in your community. Regional centers may do a "statewide search" for available placements and may find a space for you in another area of the state.

If the regional center says that it does not have a particular service or support you need and want (and it is not available from a "generic" source) or the regional center will not provide it for any reason, you can appeal that decision through the fair hearing and appeal process. (*See Chapter 12.*) But first consider the regional center's reason for denying your request and see if there are alternatives that you can agree to.

#### **49. How can the regional center advocate for me to get services from other agencies?**

You may be entitled to various types of services from a variety of agencies and programs. Some examples of these services are:

- Appropriate special education services from your local public school,
- Equipment and services from Medi-Cal, California Children's Services (CCS) or private health insurance,

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<sup>100</sup> § 4648(e).

- Supplemental Security Income (SSI), or
- The right kinds and amounts of In-Home Supportive Services (IHSS).

If you are having trouble getting the services and benefits you need, the regional center must advocate for you. Your service coordinator (or someone else selected by the regional center) might help by going with you to your IEP meeting at the school, or help you calculate IHSS hours by figuring out how much time it takes to do different tasks at home. The regional center could also help you at an administrative hearing with one of these agencies.<sup>101</sup>

Regional centers must now have a staff person (or contract with someone) who has expertise in the areas of criminal justice, special education, family support, affordable housing and quality assurance. Regional centers must also hire a “consumer advocate” who is a person with developmental disabilities.<sup>102</sup> You should be able to go to any of these people to get help advocating.

If the regional center cannot or will not help, you can file a complaint or an appeal. See Chapter 12 for more information about appeals.

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<sup>101</sup> § 4648(b)(1), (2). Some regional centers hire attorneys to represent consumers. You can ask your regional center for this type of help.

<sup>102</sup> § 4640.6(g)(7).