

**Minimum Monitoring Activities for Individuals  
Who Have Transitioned from Lanterman to the Community**

| Month | Regional Resource Development Project <sup>1</sup> (RRDP)   | Regional Center Service Coordinator <sup>2</sup> | Regional Center Quality Assurance <sup>3</sup> | Regional Center Registered Nurse <sup>4</sup> ARFPSHN Home | On-site Facility Monitoring   |           |                  |                       |
|-------|---|--|--|--|---|-----------|------------------|-----------------------|
|       |   |  |  |  | SRH*  | ARFPSHN** | ICF***           | Day Program           |
| 1     | 5 <sup>th</sup> day (call or visit)<br>30 <sup>th</sup> day | 30 <sup>th</sup> day                             |  | Monthly  | RC<br>Semi Annually   |           |                  | RC<br>Annually        |
| 2     | 60 <sup>th</sup> day  | 60 <sup>th</sup> day                             |  | Monthly  | DSS<br>Annually   |           |                  | CARF <sup>5****</sup> |
| 3     | 90 <sup>th</sup> day  | 90 <sup>th</sup> day                             |  | Monthly  |   |           |                  |                       |
| 4     |   |  |  | Monthly  | DDS<br>Semi<br>Annually   |           |                  |                       |
| 5     |   |  |  | Monthly  |   |           |                  |                       |
| 6     | 6 months  | Semi-Annual Review                               | Semi-Annually                                  | Semi-Annual Review   |   |           | CDPH<br>Annually |                       |
| 7     |   |  |  | Monthly  |   |           |                  |                       |
| 8     |   |  |  | Monthly  | *Specialized Residential Homes<br>** Adult Residential Facilities for Persons with Special Health Care Needs (ARFPSHN)<br>***Intermediate Care Facility<br>****Commission on Accreditation of Rehabilitation Facilities |           |                  |                       |
| 9     |   | Quarterly  |  | Monthly  |   |           |                  |                       |
| 10    |   |  |  | Monthly  |   |           |                  |                       |
| 11    |   |  |  | Monthly  |   |           |                  |                       |
| 12    | 12 months   | Annual Review                                    | Annual Review                                  | Annual Review  |   |           |                  |                       |

<sup>1</sup> RRDP visits as necessary. Schedule listed is minimum requirement.

<sup>2</sup> Regional Center Service Coordinator visits quarterly after first year.

<sup>3</sup> RC QA monitoring is to Title 17 §56047 regulations and to the homes' service design.

<sup>4</sup> At least 4 visits from the Regional Center RN will be unannounced.

<sup>5</sup> Monitoring schedule depends on prior certification.

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***Other Oversight Activities***

| <b>Activity</b>   | <b>Frequency</b> | <b>Notes</b>  |
|---|------------------|---|
| <b>HBCS Waiver Review</b>   | Biennial         | Conducted by DDS/DHS  |
| <b>Regional Center Vendor Audit</b>                               | Annual           | Regional center audits vendor   |
| <b>Independent Regional Center Contract Audit</b>                 | Annual           | Independent contractor audits regional center   |
| <b>Snap Shot for the Home</b>                                     | Ongoing          | Located in individual homes for friends and family to provide feedback  |
| <b>Snap Shot for the Day Program</b>                              | Ongoing          | Located in individual day programs for friends and family to provide feedback   |
| <b>Individual Health Care Plan (ARFPSHN Home)</b>                 | Semi Annually    | Reviewed by the ISP Team or as needs of individual change   |
| <b>Quality Assessment Project/National Core Indicators</b>        | Annually         | First findings of the QA Project is scheduled to be released June 2011  |
| <b>CDER Review</b>  | Annual           | Review of the Client Development and Evaluation Report to measure and evaluate personal outcomes, quality of life and client adaptive skills. |
| <b>Reporting of Persons who Moved from LDC into the Community</b> | Semi-Annually    | Reporting to the Legislature  |