Master Plan *for* Developmental Services

Workgroup 4 Meeting

December 18, 2024

Housekeeping

- Interpretación en español: haga clic en el globo blanco en la parte inferior de la pantalla con la etiqueta "Interpretación". Luego haga clic en "Español" y seleccione "Silenciar audio original".

- ASL interpreters have been "Spotlighted" and Zoom, automatic closed captioning is active.
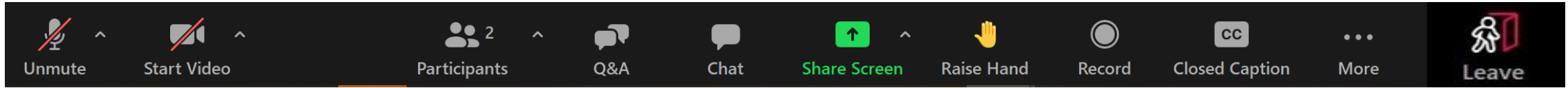
- This meeting is being recorded.

- Materials are available online.

- Questions? Comments? Email DSMasterPlan@chhs.ca.gov

Zoom Instructions

Committee members can unmute their mic when it's their turn to speak

Committee members can turn their webcams on/off

All attendees can type questions/comments in the Q&A for all participants to see. Chat is available for everyone unless it's an accessbiilty barrier to a member of the committee

Raise your hand when you want to speak
You may need to click on "Participants" and a new window will open where you can **"Raise Hand"**

Use the "leave" icon at the far right of the Zoom toolbar to leave the webinar at the end of the meeting

- Features will vary based on the version of Zoom and device you are using
- Some Zoom features are not available for telephone-only participants
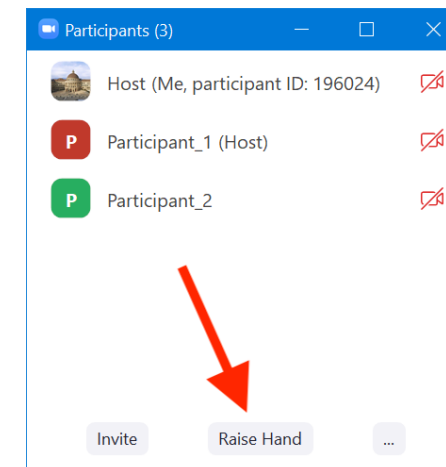
Agenda

1. Welcome and Introductions

2. Timeline for Developing Recommendations

3. Discuss Priority 1 and 2 Recommendations

    a) Intake and Assessment

    b) Performance Measures

    c) IT Systems

4. Discuss Priority 3 Ideas

5. Next Steps and Upcoming Meetings

6. Public Comment

Timeline Reminder

August 2024	September 2024	October 2024	November 2024	December 2024	January 2025	March 2025
Workgroup Kick-Off ☑	Discuss Priority 1 ☑	Discuss Priority 1 Recs ☑	Discuss Priority 2 Recs ☑	Discuss Priority 2 Recs ⭐	Discuss Priority 3 Recs	Discuss Priority 3 Recs ⭐ *Finalize Master Plan in Spring 2025*

Updates to Draft Recommendations

At the last workgroup meeting, we received great feedback about our draft recommendations.

- We updated the recommendations based on your feedback and others' comments.

- You can find these updates in the <u>workgroup #4 Teams folder</u>.

- Please take a look at these updates and share any additional comments you may have.

Universal Goal

Our universal goal is:

People get the services and supports they need, when they need them, so they can lead the lives they want.

Priority #1: Plain Language

"Make sure all regional centers follow the same rules. They should offer the same services and say what they pay for the services they give. We want everything to be clear and fair, and to use language everyone can understand."

Discuss Priority 1 NEW Recommendation:

Intake and Assessment

Recommendation: Create an intake and assessment process that is family-centered, supportive, accessible, and equitable.

- The intake and assessment process should meet the needs of individuals and their families.

- Individuals and families should feel respected, informed, and supported by regional centers.

- Individuals and families should feel empowered by their Regional centers.

- Regional centers should make things simple and communicate clearly and respectfully.

Background.

- 2023 Senate Bill 138 (SB-138) was passed. It requires DDS to create a standard intake process.

- Regional centers must check if someone is eligible, complete the intake and assessment, and keep individuals and families informed about the process.

- DDS is working on a new intake process with clear steps and forms.

- DDS wants feedback from stakeholders to design this process.

Priority 1 Recommendation: Intake and Assessment

Problem Statements:

- Regional centers don't always follow legal timelines or agree about when the timelines start.

- Some people get turned away because they don't have the right information or enough information. They are told that "they need an assessment to get an assessment."

- Some regional centers want documentation from too many sources or require too many assessments.

- People with qualifying conditions and other disabilities get turned away because they are told the other disability is the "real reason" they need services.

Who is left behind:

- Families who do not speak English as their main language.

- Families with low incomes find it hard to get resources they need.

- Families with limited education.

- Culturally diverse families may not feel that the process is sensitive to their unique needs and values.

- People with IDD who also have other disabilities and have a lot of need for support.

- Adult applicants that have no documents from when they were little.

- Individuals in multiple systems, including mental health systems, foster youth in the child welfare system, juvenile/criminal justice systems.

Clarify key terms and legal requirements

- Define "Request for Assistance" so that there are **clear standards about when the intake timelines start**.

- Define the **minimum amount of "proof"** that someone with a suspected qualifying condition needs to get past the intake stage and get an assessment from the regional center.

- Define "at risk" groups that should **automatically proceed past intake** when they have a suspected qualifying condition, even if they don't have records.

- Define "at risk" groups can get **quick 60-day assessments**.

Clarify key terms and legal requirements

- **Form a workgroup** with experts, regional centers, and clients served by regional centers and families to help develop statewide assessment standards.

  - A workgroup should research what works well and recommend standards that everyone must follow.

  - A workgroup can identify or work on a screening tool that could help people who don't have any records.

  - A workgroup should develop standards to make sure that people with qualifying conditions are not being turned because they have other conditions, or for other reasons.

Priority 1 Recommendation: Intake and Assessment

Recommendation to improve transparency, equity and accountability:

- **Improve data collection about every step of the process,** such as dates that intakes and assessments, or expedited assessments start and end. Include things like race and ethnicity, how long each step takes, who is turned away and why.

- **Create regional center performance standards** such as the average number of days between a request for assistance and the initial intake, the average number of days it takes to complete an assessment and reach a decision, etc.

- **Summarize data on important trends** and make that data available on each regional center's website.

Improve Person-Centeredness of the Entire Process:

- **Simplify materials and data collection.** Create clear documents in plain language with pictures that explain the intake process. Make the process simple by having all the information needed in one place.

- **Create ways for families to share feedback** on their experiences with the intake and assessment process.

- **Train intake and assessment coordinators** on how to be kind, understand, and be sensitive to other peoples' feelings so they can better help individuals and families.

- **Hire bilingual staff and provide language translation services** for families who speak languages other than English.

Discuss Priority 2 Recommendation:

Performance Measures

Priority #2: Plain Language

- Make it easy for everyone to get information they need and want.

- Let people see their own information.

- Keep personal information private.

- Help people easily find their way through services.

- Check if people are getting the services they need.

- Make it easy to understand if the system is working well.

- Share information for research and to check how things are going.

Recommendation: Create a clear set of performance, quality and outcomes measures. Create measures at the individual, regional center, and systemwide level.

Measures will:

- Be included in any statewide information technology system.

- Link with other important state datasets for research.

- Include "benchmarks" to hold vendors, regional centers and DDS accountable.

- Meet federal legal requirements and human rights principles.

Problem Statements:

- We don't have enough measures or information to track how well regional centers and providers are doing to meet the needs of people served.

- Current measures are more focused on compliance, and not enough on person-centeredness.

- Information technology systems are too old to collect all the data we need for measures.

- Data that we do have doesn't link with other data systems – like education.

- Data is not available enough for researchers.

Priority 2 Recommendation: Performance Measures

Who is left behind:

- All people with intellectual and developmental services and their families and supporters. There isn't enough information to see if goals are being met.

- Without better data and measures, we can't see all the racial, ethnic and geographic disparities. If we can't see the disparities, we cannot fix them.

Recommendations:

- **DDS should develop a survey and process** to review regional center and vendor performance and outcome measures that are being used or proposed.

- **DDS should convene a workgroup** with stakeholders and researchers. The workgroup will make recommendations about necessary regional center and vendor quality, performance and outcomes measures.

Recommendations:

- **DDS should review the workgroup recommendations** and submit a proposal for quality, performance and outcomes measures to the legislature and to the public for feedback. DDS should work with stakeholders to use these measures across the I/DD system.

- New information technology systems for the developmental disabilities system should be built to use these measures, and adopt new measures that the workgroup recommends in the future.

Discuss Priority 2 Recommendation: Information Technology (IT) Systems

Priority 2 Recommendation: Information Technology (IT) Systems (slide 1 of 7)

Recommendation: Develop, implement and maintaining a single statewide information technology system for the California Developmental Disability Services program.

- All regional centers should use a single IT system to track service access and delivery.

- DDS should develop a plan and budget to develop the system.

- DDS should work with stakeholders to design the system.

- DDS should regularly present updates to the Legislature.

Problem Statements:

- Different regional systems use different IT systems that can't easily share information.

- Current IT systems are old and do not do all the things they need to do.

- Current IT systems don't collect all the data that is needed for measures that will help us see if things are working well.

- It is hard for people served by regional centers to get information from the current IT systems.

Who is left behind:

- People who do not have access to technology or have outdated technology.

- People who do not know how to navigate technology or do not know how to ask for help.

- People who move or transfer from one regional center to another.

DDS should develop a system that does the following things:

- Supports all regional center finance and case management needs.

- Supports all needed quality, performance and outcomes measures.

- Can link to other IT systems (e.g., education, workforce, provider service directory) for research and measures.

- Gives individuals and families secure access to all of their information. Allow them to update their personal information.

- Allows individuals to communicate with coordinators.

DDS should develop a system that does the following things:

- Creates provider, regional center and DDS-level dashboards that show how the system is doing and what can be improved.

- Has training for individuals, families, coordinators and others that need to use the system.

- Collects, manages and shares data Quality Incentive Program and Regional Center Performance Measures.

- Supports online communities so that people can share experiences, learn about available resources and gaps.

- Considers how artificial intelligence can help educate individuals and families.

DDS should work with Stakeholders to Design the IT System:

- DDS should include individuals and families, researchers, regional centers, and service providers in the design process.

- DDS should create a charter that describes how the IT system will be designed. The charter should include:

  - Rules about how the system should be developed and maintained.

  - All the things that the IT system needs to do.

  - How data will be safely collected, managed, made available for consumers, and used for measures and research.

  - How the system will be managed and updated with stakeholder input.

Priority 3 Ideas – Accountability

Priority #3 - Accountability

"Strengthen DDS, regional center, vendor and provider accountability for achieving equitable and person-centered outcomes."

Priority #3 Plain Language Version

Make sure DDS, regional centers, vendors are responsible. They need to provide the services they are supposed to. They need to give fair and person-centered results.

Idea #1 – Priority Action Checklist

Problem: *Only the client has consequences for choices they make. We have consequences for our choices as well as consequences for choices the regional center makes, but the regional center has no consequences for its actions.*

How this recommendation would improve things:

1. Prioritize urgent, critical needs of persons served.
2. Potentially prevent hardships faced by persons served.

Idea #2 – Incorporate Feedback Recommendations

Problem: DDS has not agreed to address the findings as reported by the CA State Auditor, Little Hoover Commission. Fixing the problem starts with a path towards addressing the findings by neutral third parties and the sponsors of AB 1147.

How this recommendation would improve things:

1. It would strengthen DDS, Regional Centers and Vendors by providing fair and person-centered results.
2. It will help establish guidelines and guardrails in providing accountability.

Other Priority #3 Ideas

1. Contracting and oversight
2. Incentive programs

Discussion Questions:

- What should be included in regional center contracts to make sure DDS, regional centers and vendors are responsible and provide the services they are supposed to?

- What are the goals of the incentive programs?

- How would you define incentive program success?

- What types of incentives would be most effective?

Our Next Steps

At our next meeting we will:

1. Discuss updates to Priority 2 Recommendations

2. Review Priority 3 Recommendations

Upcoming Workgroup Meetings

- **Wednesday January 29th**, 1pm - 4pm
- **Wednesday March 5th:** 1pm - 4pm

Public Comment

Public comment period will be limited to no more than 30 minutes.

If you want to make public comment regarding the topics of this meeting, please raise your hand and we will call on you in the order shown in Zoom.

At 2 minutes you will be asked to complete your thought to ensure everyone who wants to has a chance to speak.

Please let us know if you need additional time as a disability related accommodation to make your comment.

If you prefer to send comments in writing, email them to DSMasterPlan@chhs.ca.gov, or post them in the Zoom Q&A.

Thank you!

We look forward to seeing you at the next **Master Plan Committee** meeting.

Wednesday, January 8, 2024 (Los Angeles)
10:00 a.m. – 3:30 p.m.
Location: Virtual and In-Person at SNNLA
1968 Adams Blvd. Los Angeles, CA 90018

For more information visit the Master Plan website.

Email us your input at: DSMasterPlan@chhs.ca.gov

Appendix

Priority #1

"Ensure the system has a consistent, equitable, and transparent interpretation of regional centers' responsibilities by establishing a common set of statewide regional center standards, services, and rates that are accessible and fair to all of individuals, using clear, simple and inclusive language that is understandable to all of our diverse communities."

Priority #1 Plain Language

"Make sure all regional centers follow the same rules. They should offer the same services and say what they pay for the services they give. We want everything to be clear and fair, and to use language everyone can understand."

Priority #2

"Enhance data and technology systems to ensure equitable access to information and help everyone more easily navigate the systems while safeguarding the privacy of individuals that receive services:

o Provide individual and family access to their information;

o Measure individual outcomes, system outcomes and performance;

o Publish information so that it can be used for research, analysis, evaluation, and to support accountability."

Priority #2 Plain Language

Priority #2: Plain Language

- Make it easy for everyone to get information they need and want

- Let people see their own information

- Keep personal information private

- Help people easily find their way through services

- Check if people are getting the services they need.

- Make it easy to understand if the system is working well.

- Share information for research and to check how things are going

Priority #3

"Strengthen DDS, regional center, vendor and provider accountability for achieving equitable and person-centered outcomes."

Priority #3 Plain Language

Make sure DDS, regional centers, vendors are responsible. They need to provide the services they are supposed to. They need to give fair and person-centered results.