



Master Plan for Developmental Services Workgroup 1 Meeting #8 -

Summary

Thursday, February 20, 2025

12:00 p.m. - 3:00 p.m.

Virtual Zoom Meeting

Attendance

Workgroup Members in Attendance

- Chloe Carrier
- Christine Couch
- Brett Eisenberg
- Araceli Garcia
- Season Goodpasture
- Derek Hearhtower
- Judy Mark
- Angel Montoya
- Eric Ramirez
- Suzy Requarth
- Dr. Jesse Weller

Facilitators and Workgroup Co-Chairs in Attendance

- Lisa Cooley (Co-Chair)
- Fernando Gomez (Co-Chair)
- Karin Bloomer (Facilitator)

Public in Attendance

Over 100 public attendees attended the meeting via Zoom video conference.

Welcome and Housekeeping

Workgroup 1 Facilitator Karin Bloomer and Co-Chairs Lisa Cooley and Fernando Gomez welcomed the workgroup members and members of the public to the meeting. They thanked everyone for their willingness to participate and engage in this work. They encouraged members of the workgroup and the public to

participate. They also reviewed the meeting participation agreements to make sure the meeting would be respectful and productive.

Today's Focus and Next Steps (Slides 5-10)

Lisa and Karin reviewed the meeting agenda, workgroup process and timeline, and priorities.

Lisa reminded the workgroup that members were asked to review the final set of draft recommendations prior to the meeting and to propose changes to any parts that they did not support or understand. This meeting would be to address this feedback, determine support for proposed changes, and suggest which recommendations the Stakeholder Committee should discuss at the last Committee meeting on March 19th. The workgroup's deadline for any recommendation edits is February 28th. On March 7th, all of the workgroup co-chairs will meet to discuss the recommendations that the workgroups put forward for Committee discussion.

Karin noted that in the Master Plan, the recommendations will be organized by theme, not by workgroup. Some edits will be made to recommendations so that readers can easily understand the plan.

Address Key Areas of Workgroup Feedback on Recommendations (Slides 11-28)

Karin reviewed Workgroup 1 priorities and high-level overviews of each recommendation. The workgroup then discussed each recommendation that had feedback or proposed changes. If members of the workgroup did not have any questions or concerns about proposed changes, Lisa, Fernando, and Karin understood that to mean that the recommendations were considered final. These recommendations that received workgroup feedback were:

1.1 Redefine the role of the service coordinators to ensure the self-determination and neurological acceptance of clients.

Workgroup members agreed with all feedback for changes to this recommendation, including:

- Changing the wording of the recommendation to state that "The role of service coordinators should be to ensure the self-determination and acceptance of the identities of people they serve."
- Including specific identities such as neurodiversity, differences in physical abilities, gender preference, and more
- Adding a reference that all regional center staff should engage in these ways
- Respecting a client's circle of support in addition to the client

- Replacing any reference to “listening” with “seeking to understand” to acknowledge individuals from the Deaf and hearing-impaired communities
- Adding a reference to protecting clients against retaliation when they want to change service coordinators

1.3 Create a person-centered approach to the development of individual program plans (IPP) in which service decisions are made promptly and with the client’s involvement.

(a) Give service coordinators the authority to approve the IPP as part of a collaborative planning process with the individual.

Some workgroup members initially disagreed that service coordinators should be able to approve or deny services. The workgroup discussed this disagreement and concluded that the recommendation should include a note that this would be increased authority for service coordinators. Other comments about this included:

- Ensuring service coordinators do what they say they will do and immediately follow up on promises
- Ensuring that service decisions are made with the client and their circle of support’s involvement

The workgroup agreed upon adding two more concepts to this recommendation:

1. If a service is denied, before issuing the Notice of Action (NOA) there should be a meeting with the client and their circle of support to find creative solutions. If a solution cannot be reached, the regional center should continue with service coordination efforts to connect client to generic services or a solution.
2. Once an agreement is promptly reached, service implementation and access should also begin promptly.

1.4 Information transparency: Information needs to be shared in a disability-accessible way.

Workgroup members wanted to clarify that this recommendation means that an IPP would be written so that both the client and the regional center understand and are on the same page about the client’s goals. Workgroup members also proposed:

- Removing “dumbed down” and replacing it with “plain, easily understood language.”
- Adding a sentence about holding regional centers and individual staff accountable for providing information in the ways outlined in this recommendation

1.5 Strengthen and clarify the role of the Consumer Advisory Committee (CAC) at each regional center and at DDS to ensure consumers' formal role in system oversight.

Workgroup members supported including a concept about providing resources and expertise to help the CAC grow and maintain its efforts. They suggested including language about creating an environment to share ideas, complaints or thoughts in a safe and embracing manner. They also liked the idea that whoever is selected as the CAC president will also automatically become a regional center board member, and that the chairs and vice chairs of each CAC would comprise the DDS CAC.

1.6 Make sure that regional center governing boards are supported to provide effective and independent oversight of regional center and executive director performance.

1 e) Regional center Executive Directors should be prohibited from any involvement in the recruitment or election of board members.

And

4 c) Require boards to be notified of a provider's involvement in any abuse or negligent injury or death before the board takes up a vote to approve, renew, or deny that provider's contract.

Workgroup members agreed that regional center Executive Directors should not be allowed to recruit board members. They added that regional center staff and vendors should also not be allowed to recruit or vote on board members. If a service coordinator thinks that one of their clients should apply to be on the board, the service coordinator would need to notify all their clients that there is an opening on the board. Workgroup members also agreed that board members should be notified of significant problems of abuse.

A workgroup member also proposed new recommendations about public feedback at board meetings to ensure that the public has time to provide their comments to the board. Workgroup members agreed with the recommendations but noted that they would review further after the meeting.

2.1 Strengthen community networks that build understanding and connect individuals to services from people they trust.

All workgroup members supported the feedback that this recommendation should include references to community-based organizations, parent groups, community leaders, and health clinics.

2.2 Foster client support systems through peer mentoring.

All workgroup members supported the feedback that this recommendation should include references to:

- Creating and expanding Peer Mentoring Communities that offer inclusion and socialization opportunities.
- Including individuals with complex needs

The workgroup also proposed two new recommendations:

2.3 Regional centers should focus on geographic areas far removed from regional center offices and come to the community where it is more challenging to access and maintain services.

2.4 DDS should analyze the gap between the number of individuals with I/DD across the state and the number of individuals served by the regional center system. Create a strategy to improve on engaging each individual who qualifies for services. Have a strong focus on communities of color.

Workgroup members supported these new recommendations and asked that location be removed as a barrier to services. They also supported adding references to tribal and farm communities and ensuring regional centers are held accountable to these recommendations.

3.1 Self-Determination Program Recommendation #3

3. Ensure every regional center client receives unbiased information about the opportunity to participate in the SDP at each annual IPP meeting.

And

a) Require regional centers to offer SDP as a standard service model option to every client at their first IPP meeting, at each annual IPP meeting, and at any time upon the client's request.

All workgroup members supported the feedback that:

- The title statement should say that participation in the SDP should be extended to everyone via IPPs as described above.
- Regional centers should promote the SDP option in all collateral and marketing materials

3.2 Give clients more choice and flexibility in services and providers.

e) Prohibit service providers from "cherry picking" clients: this means service providers cannot be allowed to only accept clients that seem

"easiest to support." This is unfair and robs individuals of choice in providers.

All workgroup members supported the feedback that "cherry-picking" should be replaced with "selecting clients based on their own criteria."

3.4 Strengthen individuals' decision-making autonomy and minimize conservatorship.

3. Pursue a state plan to remove all conservatorships that DDS is responsible for.

All workgroup members supported the feedback that #3 under 3.4 should be clarified by phrasing as "DDS should create a plan to remove all of their court-appointed conservatorships of regional center clients." Workgroup members also suggested that DDS should be prohibited from adding conservatorships.

4.1 Enable individuals to access any service they are eligible for no matter where they live.

All workgroup members supported adding the following to this recommendation:

- If and when a service is approved but there are no available vendors, the regional center will work with the individual to find a suitable option
- The responsibility and lack of services should not be the burden of individual served
- In addition, regional centers should track areas they are deficient in and create a plan to address deficiencies

4.2 Ensure language is not a barrier to accessing services at any regional center.

All workgroup members supported adding the following to this recommendation:

- Any entity providing interpretation services with our systems of support should receive trainings, standards, and certification to assure there is a level of understanding of our communities and system
- In addition to having materials in diverse languages, there should also be a strategy within the regional center system to provide access to these materials for the specific community it targets.
- Have an office at DDS that receives and responds to complaints about poor interpretation or translation related to IPPs, service providers, fair hearings, and other interactions

Suggest recommendations for committee discussion (Slides 29-31)

Workgroup members agreed that the committee should discuss recommendations 1.2, 1.3, 1.6, 3.1, 3.3, and 3.4.

Thank You (Slide 33)

Karin, Lisa, and Fernando thanked the workgroup members and members of the public for their work in creating the workgroup's recommendations.

Public Comment (Slide 34)

At the end of the meeting, the workgroup co-chairs and facilitator supported a 45-minute public comment period. A summary of public comments is included in the Public Comment summary document which is available with other meeting documents here: <https://www.chhs.ca.gov/home/mpds-committee-workgroup/#february-20-2025-%e2%80%931200-to-300-pm>.

Meeting Materials:

Discussion PowerPoint and other meeting documents:

<https://www.chhs.ca.gov/home/mpds-committee-workgroup/#february-20-2025-%e2%80%931200-to-300-pm>