



MASTER PLAN *for* Developmental Services

Workgroup 5 Meeting

January 17, 2025

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.

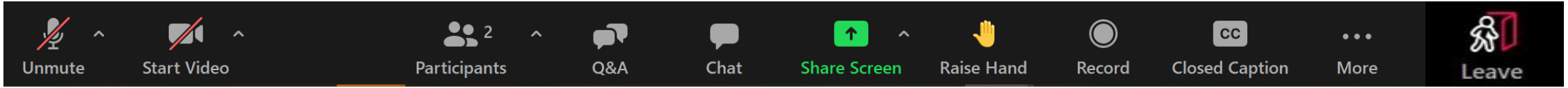


- Materials are available online on the [Master Plan website](#).



- Questions? Comments? [Email DSMasterPlan@chhs.ca.gov](mailto: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

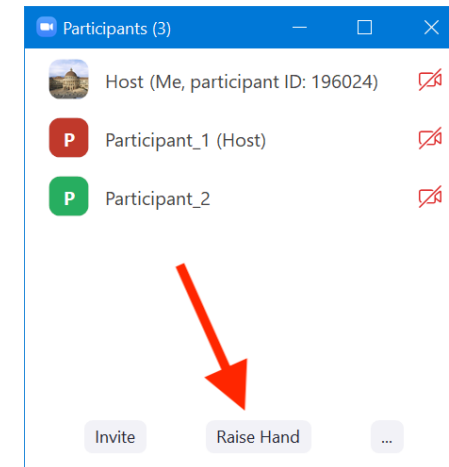
All attendees can type questions/comments in the Q&A for all participants to see. Chat is available for everyone unless it's an accessibility barrier to a member of the committee.

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Agenda

1. Welcome
2. Timeline for Creating Ideas and Recommendations
3. Update on Priority 2 Recommendation #8: Gap Analysis
4. Updates on Overlap with Other Workgroups
5. Update to Priority 1 Recommendation #1
6. Priority 3 Universal Goal and Problem Statement
7. Priority 3 Draft Recommendations
8. Upcoming Meetings
9. Public Comment

Community Agreements

1. Show respect toward others
2. Listen for understanding
3. Create a safe space for difficult conversations
4. Share time and space for everyone to contribute
5. Support an inclusive environment
6. Embrace collective wisdom
7. Build Community
8. Teamwork

Workgroup 5 will meet every month for six months. We will develop recommendations for workgroup 5 priority areas for the Master Plan

Jan 2025 ★	Update Priority 2 and Priority 3 Recommendations
Feb 2025	Update and Finalize Workgroup Recommendations
Mar 2025	Final Updates → Master Plan to Legislature Spring 2025

Developing Our Recommendations

1. **Discuss recommendation ideas:** Talk about ideas and get consensus for recommendations.
2. **Draft recommendations:** Co-Chairs, workgroup and staff will use the ideas to develop draft recommendations.
3. **Review recommendations with Workgroup:** Members will review, discuss and revise draft recommendations.
4. **Review Recommendations with Master Plan Committee:** Recommendations will be presented to the Master Plan Committee for feedback and approval.

Update on Priority 2 Recommendation #8:

Gap Analysis

Workgroup 5, Priority #2



Priority #2: Integrate waiver and State Plan services across systems to improve quality of life and outcomes.

Priority #2 Simplified version: Connect the different types of services that people with developmental disabilities use in California (Regional Center, schools, mental health, and more). This will help all the systems work together to help people live better lives and reach their goals.

Why Gap Analysis recommendation?

- To make services better for people with I/DD, it is important to understand and have good information on what is working well in the system and what is not working.
- It is important to know what services are missing that people need, who is left behind, and to have accurate data.
- It is also important to look at the system not only once, but over time. This will help everyone see if the system and services are getting better and if there are new problems to fix.

HCBS Gap Analysis: update from DHCS

Priority 2, Recommendation 8: Gap Analysis (1/4)

- We recommend a study of the ways people with developmental disabilities are served in systems across California. This is called a gap analysis.
- A gap analysis is a way to make sure that we know the ways the system is and isn't working, so that it is easier to fix or change it.
- The recommendation was originally for the gap analysis to be specifically of Medicaid.
- This was to make sure that Medi-Cal and related systems (like In-Home Supportive Services (IHSS)) are being looked at to make sure they make changes to better serve people with developmental disabilities.

Priority 2, Recommendation 8: Gap Analysis (2/4)

- It is also important to look at other systems people use in the state that are not Medi-Cal or the Regional Center (like the foster care system, schools, and the justice system).
- This is to make sure we know all the ways people with developmental disabilities need to be supported in those systems and all the different funding types that might help us get there.
- If people need support in learning how to work with people with developmental disabilities, Regional Centers should play an important role. This is sometimes called "technical assistance."

Priority 2, Recommendation 8: Gap Analysis (3/4)

- There also needs to be a big conversation across systems about the needs people have and where they currently are and aren't being met. This information will help make sure technical assistance can happen and work well.
- It can also help us better support people from different cultures, who speak different languages, and more.
- We are trying to make sure that everybody who works in different state systems works together to support people with developmental disabilities, because this is important to help California thrive.

Priority 2, Recommendation 8: Gap Analysis (4/4)

As part of the gap analysis, review the Lanterman Act to:

- List all services that people with intellectual and developmental disabilities (I/DD) should get.
- Find out who pays for each service and which agency is in charge of it.
- Make sure people with I/DD can actually get all the services they need and have a right to.

Updates on Overlap with Other Workgroups



1. The recommendation on improving ways people find out about DD services and Regional Centers have been referred to Workgroup 1.
2. Priority #2 Recommendation #7 – Quality of Life Metrics, has been referred to Workgroup 4:

Develop Quality of Life Metrics with focus on defining measurable outcomes prioritizing quality of life for individuals with developmental disabilities, such as independent living, education success, and mental well-being. Use these metrics to evaluate how well services across systems are working together to achieve these goals.

Updates on Overlap with Other Workgroups



1. Recommendations from the homework survey for Priority #3 that will be referred to other workgroups:
 - The idea about developing community resources database was referred to Workgroup 2
 - The idea on developing peer supports was referred to Workgroup 1

Update to Priority #1, Recommendation #1



We are adding an item to Priority #1 recommendation #1: Make it as easy as possible for individuals to enroll in I/DD Waivers and Medi-Cal through one simple process with supports.

The item we are adding is:

- Explore options for raising income limits above current levels to allow more people to be Medicaid eligible, including through the working disabled program.

Workgroup 5, Priority #3



Priority #3: Innovate and expand person-centered and culturally informed service types that support community living and can be covered by Medicaid or other systems, such as housing or transportation, to promote inclusive systems and communities.

Priority #3 Simplified Version: Create new and expand person-centered and culturally informed services (such as housing, transportation, education, local resources, and more) that support people to live in their community how they want. Make sure Medicaid or other programs can pay for these services.

Workgroup 5, Priority #3

Universal Goal



- Californians with intellectual and developmental disabilities get innovative, person-centered, and culturally informed services from all systems, community organizations, and their communities. This supports people with I/DD to live in their community how they want.
- Systems and services are well funded by Medicaid or other programs and funding sources.

Workgroup 5, Priority #3

Problem Statement



- Some important services and supports, like help with affordable housing, are not enough for all people who need them. It is even harder for people with I/DD to receive those services.
- California is facing an affordable housing crisis as home values and rents have become among the highest in the nation. The affordable housing crisis disproportionately impacts people with IDD as the vast majority live on fixed incomes that are at or near poverty level thresholds.

Workgroup 5, Priority #3

Problem Statement

- When people with I/DD are excluded or have a hard time getting services and supports from other systems or organizations that are supposed to serve them, I/DD system has to fill in the gap or provide more costly services. These services may not be eligible for Medicaid/federal match. This can impact DDS budget.
- Students with I/DD are not provided equitable opportunities to be fully included in educational process. Special Education system needs an overhaul.

Workgroup 5, Priority #3

Problem Statement

- Some services and supports can still make it harder for people with IDD to be included in the community or make their own choices. These service models can feel like old-style institutions.
- More innovative models are needed that do not put people with I/DD into separate places where they can only be with other people with disabilities and paid staff.

Workgroup 5, Priority #3

Problem Statement



- Students with complex needs do not get access to meaningful education opportunities with needed supports. This leads to lack of opportunities later in life, like employment. Lack of access to equitable education sets trajectory for the rest of person's life.

Priority #3 Summary of Recommendations



1. Supported Living Services
2. Enhanced Supported Living Services
3. Innovative Service Models Where People Share Resources and Services
4. Day Programs
5. Technology
6. Grants and Other Funding Sources
7. Specialized Remote/Virtual Supports
8. School System
9. Transition Out of Institutional Settings
10. Contingency Planning for Potential Federal Budget Cuts
11. Housing and Homelessness Supports
12. Transition Models for Individuals Who Are Supported by Aging Caregivers

Priority 3 Draft Recommendation #1: Supported Living Services (SLS)

- Develop enough providers of SLS so that people do not have to wait to receive it.
- Create ways to make sure services are high quality, person-centered, and culturally informed.
- Develop a way to make sure that SLS is following Home and Community Based Settings rule requirements (HCBS rule), even though SLS settings are person's own homes and presumed to be HCBS compliant.
 - DDS should consider using a client Advisory Council or another method to identify, review, and resolve problems.
- Make SLS services available to people living with family.

Priority 3 Draft Recommendation #2: Enhanced Supported Living Services



- Continue to develop and expand Enhanced Supported Living Services model to provide individualized, trauma informed, culturally responsive services to individuals who choose this option in their own or family home.
- Proactively develop Enhanced Supported Living Services providers.
- Provide information and educate individuals and families about this option.
- Explore how Enhanced SLS supports could be adjusted to be used in long term single foster home settings for those children with complex needs that cannot stay at home but want to remain near their families and communities.

Priority 3 Draft Recommendation #3: Innovative Service Models Where People Share Resources and Services



- DDS should work with individuals with I/DD and families to think about and develop innovative service models where people can share resources and services.
- This can include sharing staff or hours of support, for example “time banks”. Such models can be called co-op model.
- These models could be more resource effective and maybe easier for people to get assistance from providers who are not their parents or relatives.

Priority 3 Draft Recommendation #4: Day Programs

- Develop and create programming that is individualized, person-centered, is culturally responsive and provides opportunities for person to authentically participate in and contribute to their community.
- Ensure that community inclusion and participation opportunities and supports are available to all individuals, regardless of the setting they live in.
- Access to meaningful day activities must be supported with access to transportation.

Priority 3 Draft Recommendation #5: Technology (1/8)

- Support individuals in getting needed technology, including internet or cell services, to better access services and opportunities such as telemedicine, distance learning, jobs, or to access and be included in virtual communities and social media.
- Explore non-Medicaid funding sources, state and federal funds to get rural communities stable connectivity (such as USDA broadband connectivity for rural areas).
- Consider tax incentives for internet providers to expand their ranges or satellite providers to provide low-income options.

Priority 3 Draft Recommendation #5: Technology (2/8)

- Increase access to effective communication, including communication supports. This can include:
 - Easy access to augmentative and alternative communication (AAC) evaluations and devices, including mainstream technologies such as tablets and smart phones
 - Easy access to ongoing services and supports to use AAC devices and expand person's ways to communicate

Priority 3 Draft Recommendation #5: Technology (3/8)

- Increase access to effective communication, including communication supports. This can include:
 - Proactively work to increase the number of organizations that provide translation and interpretation services to people with IDD whenever needed (e.g., ASL, cognitive interpretation, etc.)
 - Proactively increase the number of trainings for direct support staff and other professionals (including healthcare and behavioral health professionals) to support people with IDD's communication, learn people's communication methods and systems, and improve their own skills as communication partners

Priority 3 Draft Recommendation #5: Technology (4/8)

- Make choice of virtual and remote supports more available to those who want them. Consider virtual and/or hybrid model for people whose work takes them out of town.
- Virtual and remote services should be made available based on person's preferences and not for provider/vendor convenience.
- In-person options and options to receive services without using technology should always be made available for those who prefer them.
- Remove geographic constraints, such as limits that come from current vendorization process, and increase ability to get remote services. Traditional services are location -dependent, limiting access to individuals in rural areas.

Priority 3 Draft Recommendation #5: Technology (5/8)

- Make technology that helps people be more independent more easily accessible to those who need it.
 - Make it easy and fast for people to get assistive technology they need. This includes clarifying roles and responsibilities of different entities and funding sources to provide assistive technology.
 - Provide supports to make sure there are enough vendors with necessary skills to provide assistive technology, equipment (like wheelchairs), and environmental accessibility modifications (like ramps, or wider doors) timely.

Priority 3 Draft Recommendation #5: Technology (6/8)

- Make technology that helps people be more independent more easily accessible to those who need it.
 - Expand access to innovative technology, such as “smart homes”, to help people be more independent in their own homes and make them be less dependent on help of staff. Research, explore, and pilot independent living with use of technology.

Priority 3 Draft Recommendation #5: Technology (7/8)

- Provide supports and learning opportunities to help individuals, their families, and their support staff to improve their skills in using technology. This is called “digital literacy”.
- This can include learning about technology like “Zoom” that can help people in their daily lives.

Priority 3 Draft Recommendation #5: Technology (8/8)

- Develop a Life Tracker System that supports individuals from birth through end of life.
 - In Life Tracker, all systems of support are tied together, and there is technological innovation that helps alert to lags in response time or services.
 - Life Tracker has client portal access. This portal can be similar to “My Chart” where individual can communicate with RC and providers.
 - It also supports communication with the different systems’ partners and provides each system of support (Behavioral health, Regional Centers, School, Department of Rehabilitation (DOR) etc.) their unique areas of access to track, deliver, and monitor services.

Priority 3 Draft Recommendation #6: Grants and Other Funding Sources

- Explore and prioritize use of grant funding to do and pilot innovative projects and service delivery models.
- Provide advance notices to community partners, potentially eligible or interested in applying, about federal or other funding opportunities or grants.
- Partner with researchers, universities, also specifically UCEDDs, to explore innovative models and opportunities.

Priority 3 Draft Recommendation #7: Specialized Remote/Virtual Supports (1/2)



- Partner with Managed Care and community-based organizations to provide I/DD-specialized telehealth services to individuals with I/DD.
- This allows individuals to connect quickly with a doctor at any hour of the day, 365 days a year, for any medical concern or for disability-specific advice.

Priority 3 Draft Recommendation #7: Specialized Remote/Virtual Supports (2/2)



- Specialized virtual doctor or psychiatric appointments can help reduce costs associated with first responder calls, emergency department, urgent care usage and hospitalizations.
- This further addresses issues for rural families and individuals that cannot access the same resources as populated areas, by giving them access to experts in their own home and communities.

Priority 3 Draft Recommendation #8: School System (1/6)

- Educational system and educator workforce development must be based on the principles of Universal Design for Learning to ensure that schools and educational organizations are competent to serve everyone, including individuals with I/DD, in an equitable and inclusive way.
- “Universal design for learning” framework for teaching and learning treats students’ varied physical, intellectual and learning needs as the norm, not an exception.

Priority 3 Draft Recommendation #8: School System (2/6)

- Schools and teachers should receive adequate supports, training, and resources to make inclusion a reality. This includes making mental health supports in schools fully accessible to students with I/DD.
- There should be accountability measures for public education system which can include metrics on graduation rates, transitioning into post school education or jobs, and more.

Priority 3 Draft Recommendation #8: School System (3/6)

- We recommend a gap analysis of the ways people with developmental disabilities are served by the school system in California.
- A gap analysis is a way to make sure that we know the ways the school system is and isn't working, so that it is easier to fix or change it.
- This study will help us see where schools are doing well and where schools are not providing fully inclusive, person-centered learning experience for students with I/DD.
- This study should be done with input from individuals with I/DD and their families.

Priority 3 Draft Recommendation #8: School System (4/6)

- California Department of Education and local partners should work with individuals with I/DD, their families, and other community partners to develop and implement ways to fix gaps and issues and to transition public education system to the Universal Design for Learning.
- Develop formal Memorandum of Understanding (MOU) or another formal agreement that will:
 - Clarify roles and responsibilities between school system and I/DD DDS system.
 - Identify which system is responsible for what services and which funding source/budget should pay for it.

Priority 3 Draft Recommendation #8: School System (5/6)

- Develop formal Memorandum of Understanding (MOU) or another formal agreement that will:
 - Require and describe a process for collaboration and coordination at state and local level
 - Require and describe a process on how schools and RCs/service coordinators should coordinate/collaborate on services and supports for school aged children to ensure continuity, consistency, and seamless services and supports.

Priority 3 Draft Recommendation #8: School System (6/6)

- Funding and accountability: ensure all school programming, including that is funded through grants such as Expanded Learning Opportunities Grants, is fully accessible to students with I/DD with necessary accommodations and supports.
- Partner with school systems and after-school programs to develop more inclusive before and after school support options for learning and skill development.
- Maximize use of Federal funding for Early Start and Special Education Grants. Partner with school system to develop better relationships and inclusive programs that provide supports to individuals and families.

Priority 3 Draft Recommendation #9: Transition Out of Institutional Settings



Using the experience and lessons learned from closing state operated institutions, DDS will develop and implement a plan to support individuals to move from institutional settings into community settings with appropriate supports.

Priority 3 Draft Recommendation #10: Contingency Planning for Potential Budget Cuts at the Federal Level



Placeholder

Priority 3 Draft Recommendation #11: Housing and Homelessness Supports



Learning session is being scheduled.

Priority 3 Draft Recommendation #12: Transition Models for Individuals Who Are Supported by Aging Caregivers



Placeholder

Upcoming Workgroup Meetings



- Friday, February 21, 2025
- Thursday, March 6, 2025

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](mailto:DSMasterPlan@chhs.ca.gov), or post them in the Zoom Q&A

We can't help you with your services (or your family member's services) during public comment. If you need help, please contact the independent Ombudsperson's Office at: Ombudsperson@dds.ca.gov or call: 877-658-9731.

Thank you!

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

Wednesday, February 12, 2025

10:00 a.m. – 3:30 p.m.

Location: Ed Roberts Campus
3075 Adeline St, Berkeley, CA 94703

For more information [visit the Master Plan website](#)

[Email us your input](mailto:DSMasterPlan@chhs.ca.gov) at: DSMasterPlan@chhs.ca.gov

