

The background of the slide is a top-down view of a collaborative workspace. It shows several people's hands and arms as they work on a large table. There are various hand-drawn diagrams and sketches on the table, including a large yellow circle with a lightbulb and three lightning bolts, a blue circle with an eye, a green circle with a computer monitor, and an orange circle with a coffee cup. There are also gears, puzzle pieces, and stars scattered around. The overall theme is teamwork and creative problem-solving.

# MASTER PLAN *for* Developmental Services

Workgroup 1 Meeting  
October 30, 2024  
12:00-3:00 pm

# 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.

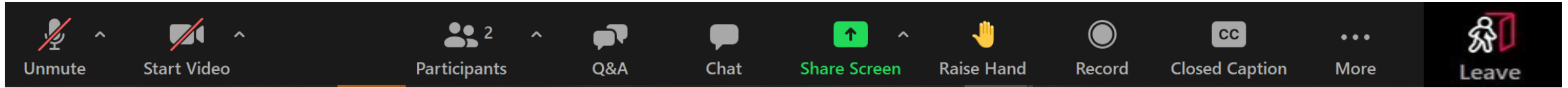


- Materials are available online on the [Master Plan website](#).



- 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

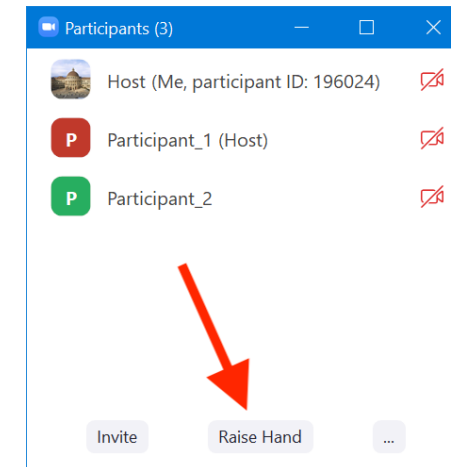
All attendees can type questions/comments in the Q&A for all participants to see. Chat is available for everyone unless it's an accessibility barrier to a member of the committee.

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. Review Workgroup 1 Process and Timeline for Creating Recommendations
3. Use the Equity Tool Steps to Discuss Priority 4
4. 10-Minute Break
5. Overview of SB 1281 and the Self Determination Program
6. Review Survey and Workgroup Teams Website
7. Invite General Public Comment

# Workgroup Process and Timeline



**Workgroup 1 will meet monthly for 7 months. We will develop recommendations for the Master Plan for Disability Services.**

2024					2025	
August	September	October	November	December	January	February
Workgroup launch meeting	Use Equity Tool to discuss ideas for Priority 1	Use Equity Tool to discuss ideas for Priorities 2, 3 and 4	Refine Recommendations	Refine Recommendations	Refine Recommendations	Finalize recommendations
✓	✓	✓ ✓				
					Bring draft recommendations to Master Plan Committee	

# Workgroup 1 Priorities



1. Build trust in Regional Center systems and other systems, particularly for people of color.
2. Make sure that anyone who is eligible for services learns about, understands, and gets individualized and timely services- regardless of their age, language access, race, ethnicity, location, or other characteristics.
3. Ensure individuals have choice and control over their lives by making self-determination the core of the developmental disabilities system.
4. Ensure equity of access and options in Regional Center services to support consistency in the experience of families and individuals, while still assuring a person-centered system.



# Use our Equity Tool for Priority #4



**Priority #4:** Ensure equity of access and options in Regional Center services to support consistency in the experience of families and individuals, while still assuring a person-centered system.

**Problem statement** → Where are we now? What do individuals and communities currently experience?

**Causes of Problem** → What is causing these problems people experience?

**Information** → What data or information will help answer these questions?

**Recommendations** → What are possible solutions to this problem that help us achieve Priority #4?

# Problem Statement



**Priority 4:** Ensure equity of access and options in Regional Center services to support consistency in the experience of families and individuals, while still assuring a person-centered system.

**Problem statement** → Where are we now? What do individuals and communities currently experience?



## **Equitable Access to Services:**

- People deemed high functioning are often overlooked and not provided the necessary support
- Language barriers and unclear information from regional centers make it hard to understand available services
- Families are sometimes denied support services like respite care or behavior analysis without a clear reason or help to appeal
- Many people do not receive services, and when they do, the services are poor

# Problem Statements (From Homework) (2/3)



## **Service Provider Competence:**

- Service providers lack training and experience in dealing with the needs of individuals who appear high functioning
- Interpreters and bilingual coordinators may not explain disability services clearly
- Service coordinators often schedule meetings with clients without the advocates present

## **Communication and Advocacy:**

- Parents often don't know they can challenge service denials and aren't taught how to advocate for themselves
- There is a lot of miscommunication about living options and available services, causing mistrust in the system
- The burden is placed on the client to communicate with the regional centers, not the other way around

### **Systemic Inconsistencies:**

- Inconsistent service offerings across different regional centers lead to inequities in service delivery
- High staff turnover makes these inconsistencies worse, affecting service quality

### **Testing and Assessment Bias:**

- IQ and Autism Spectrum Disorder tests are often biased towards English speakers, leading to inaccurate results for non-English speakers

# Causes of Problem



**Priority 4:** Ensure equity of access and options in Regional Center services to support consistency in the experience of families and individuals, while still assuring a person-centered system.

**Causes of Problem** → What is causing these problems people experience?

# Causes of Problem (From Homework) (1/3)



## **Misperceptions and Misunderstandings:**

- High-functioning individuals are often assumed to be lazy
- Interpreters may not adequately translate disability service system terminology
- Bilingual service coordinators sometimes struggle to translate disability services accurately

## **Lack of Training and Experience:**

- Service providers often lack experience in meeting the needs of high-functioning individuals
- More training is needed to handle individuals with developmental and intellectual disabilities effectively

# Causes of Problem (From Homework) (2/3)



## **Trust and Communication:**

- There is a general mistrust of regional centers, as people feel services are often denied
- Service coordinators need to build relationships of trust and ask more questions to understand unique needs

## **Sociocultural Barriers:**

- New immigrants without immediate access to transportation have difficulty attending eligibility appointments
- People with lower socioeconomic status and people of color feel they need to beg for services in Individual Program Plans (IPPs)

# Causes of Problem (From Homework) (3/3)



## **Systemic Issues:**

- Inconsistent DDS oversight and accountability have led to long-standing issues
- The structure of regional centers as separate non-profits in California contributes to inequity
- Lack of uniform training and systems makes the problem worse

## **Resource Shortages:**

- There is an employee shortage
- There is an imbalance in the availability of providers across regions



# Data or Information Needed



**Priority 4:** Ensure equity of access and options in Regional Center services to support consistency in the experience of families and individuals, while still assuring a person-centered system.

**Information** → What data or information will help answer these questions?

# Data or Information Needed (From Homework)(1/2)



## Data Collection:

- Information about the ages, languages, and services people use at regional centers
- Available supports other than regional center services
- Random surveys post-IFSP/IPP to get feedback
- Qualitative information about lived experiences with the regional center system
- Reasons for denials

## Comparative Analysis:

- How other states handle services for non-English speakers, including details about New York City's YAI program

# Data or Information Needed (From Homework) (2/2)



## **DDS Accountability:**

- Information about regional center contracts and how they are held accountable
- Consequences for regional centers not meeting their contracts
- Historical actions taken by DDS
- Reasons for DDS interventions or lack of intervention

## **Workload Concerns:**

- Data confirming that service coordinators have high caseloads

## **Service Availability:**

- Data on services offered in each region, number of providers, and caseloads for each service
- Length of time between approval process to service delivery

# Ideas for Recommendations



**Priority 4:** Ensure equity of access and options in Regional Center services to support consistency in the experience of families and individuals, while still assuring a person-centered system.

**Recommendations** → What are possible solutions to this problem that help us achieve Priority #4?

## Equity and Access:

- Make sure everyone has the same access to Regional Center services across all communities, regardless of immigration status, and maintain consistency in services provided
- Make services available in areas with fewer resources
- Make sure all demographic groups have equal opportunities to access support

## **Cultural and Linguistic Competency:**

- Create programs and materials in multiple languages to serve diverse cultural communities
- Make sure all regional center employees meet cultural and linguistic competency requirements
- Translate service descriptions, forms, and information about resources like IHSS and employment into plain language for families and clients who speak different languages

## **Community Outreach and Education:**

- Work with local communities through early head start programs, community organizations, and healthcare providers to educate about regional center services
- Host informational sessions
- Provide materials to local health clinics, schools, and community centers
- Partner with local leaders to raise awareness about available services



## **Mentorship and Support:**

- Create mentor programs within different language communities
- Assist extended family members in applying for regional center services
- Train bilingual psychology students to perform assessments
- Offer support networks for grandparents, aunts, and uncles who are caregivers

## **Standardization and Accountability (Related to AB 1147):**

- Create common performance measures and protocols across all regional centers, with rewards for good performance and consequences for failing to meet standards
- Assess regional centers on community integration, employment, equity in service access, case management responsiveness, individual and family choice, consumer satisfaction, human and civil rights, and health and safety
- Make performance data accessible in machine-readable formats
- Place underperforming regional centers on public probation, if necessary, to ensure accountability and continuous improvement

# Ideas for Recommendations (From Homework)



## **Person-Centered Services:**

- Adapt services to meet the individual needs of clients, including offering intellectually challenging activities and social coaching for high-functioning individuals
- Ensure flexibility to customize services to each person's unique circumstances and goals
- Service coordinators should focus on problem solving

## **Communication and Transparency:**

- Improve communication between clients and counselors and provide regular feedback loops
- Make sure performance measures and service availability are publicly reported
- Foster transparent practices to build trust with the community
- Service coordinators should track client meetings and ensure consistency
- More one-on-one communication between service coordinators and clients
- Restructure the emergency line

## Technical Assistance:

- Provide technical assistance to underperforming regional centers from other successful regional centers or subject matter experts
- Provide support from peers who have achieved success
- Contract with external experts to improve services and operations

# For Discussion



## Workgroup members and members of the public:

Which of these ideas are needed to achieve Priority #4, and why?



**BREAK**

## Priority 3 and Senate Bill 1281



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Developmental Services

Priority 3: Ensure individuals have choice and control over their lives by making self-determination the core of the developmental disabilities system.



# Governor's Veto of Senate Bill 1281



MASTER PLAN *for*  
Developmental Services

"...I share the author's intent to **increase equitable access to the Self-Determination Program (SDP) and improve standards and consistency throughout the system.** However, the California Health and Human Services Agency is currently leading the development of the **Master Plan for Developmental Services**, with active stakeholder participation and contribution to the vision. Part of this process includes making recommendations to improve the implementation of the SDP, and as such, this platform **should be utilized to advance these conversations.** I look forward to considering any future proposals that will make improvements to the SDP for the benefit of consumers and families." - Governor Newsom

# SB 1281: Advancing Equity and Access to the Self-Determination Program Act

Authored by Senator Caroline Menjivar  
Co-sponsored by Disability Voices United  
and Integrated Community Collaborative

# Main Goal

DDS must make measurable improvements towards achieving equity in outreach and program promotion by race, ethnicity, and regional center in the SDP

# Freedom: make it easier for everyone to access the SDP and reduce disparities

- Participants have the right to pick their own services, providers, and goods.
- The regional center must respect these choices.
- The goods and services in the spending plan don't have to match the services listed in the individual budget.

# Authority: make sure that everyone has access to quality Financial Management Services (FMS)

- Requires regional centers to send spending plans and authorizations to FMS promptly
- Allows FMSs to makes purchases in spending plan without further review
- Requires FMSs providing sole employer services to pay any penalties if they break labor laws

# Support: clarifies the rights of participants to choose their own services and supports

- Spending plan can have estimated costs
- Spending plan does not need to name specific provider
- Regional Center Purchase of Service Standards rules do not apply to spending plan

# Responsibility: makes sure that participants control their own program

- Regional center reviews spending plan to ensure ONLY that:
  - Generic resources are used first
  - Services are federally reimbursable
  - Participants assign services and goods only to the three budget categories



# Confirmation: requires consistency across the state at every regional center to ensure equity

- Reduces racial and geographic disparities by creating consistency in every regional center
- Requires DDS to set up easy-to-follow processes for SDP participants statewide to: enroll, set individual budgets, develop spending plans, select services and supports, use FMSs

## Workgroup members and members of the public:

What ideas from S.B. 1281 are important for achieving Priority #3?

Priority 3: Ensure individuals have choice and control over their lives by making self-determination the core of the developmental disabilities system.

# AB 1147, Which Was Signed Into Law, States:

The Secretary of California Health and Human Services shall solicit input through the committee, or through other means, from individuals with intellectual and developmental disabilities and their families, professionals in the developmental services field, and a broad range of subject matter experts on topics that may include, but are not limited to, **regional center board accountability and transparency and the evaluation of regional centers, including performance, equity, and diversity.**

# Review Survey and Workgroup Teams Website

# Workgroup Survey about Support for Draft Recommendations



**MASTER PLAN** *for*  
Developmental Services

- The survey will list the draft recommendations that workgroup members have suggested for Priorities 1, 2, 3, and 4.
- The survey will ask you to express your level of support for a draft recommendation using the following scale:
  - 1 = I fully support developing this draft recommendation.
  - 2 = I support the draft recommendation with some suggested additions or modifications that I will share.
  - 3 = I do not support this draft recommendation and will explain why.
- When you rate something a 2 or a 3, the survey will ask you to explain.

# Workgroup Survey about Support for Draft Recommendations



MASTER PLAN *for*  
Developmental Services

- Finally, the survey will ask you to mark an X next to the 5 draft recommendations **for each priority** that are most important to you.
- The draft recommendations that have the most interest from workgroup members will be the draft recommendations we start with for our recommendations work.

# Workgroup Survey about Support for Draft Recommendations



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- So far, we have 51 draft recommendations and still need to add ideas from today's meeting!
- Each workgroup member will be given the option to complete the survey in a Word Doc or in a Google Doc that is just for them. You get to pick the format that is easier for you to use.

# Workgroup Teams Website



There are two important areas in the Workgroup Teams website. We want to make sure you know about them and can use them.

## Workgroup 1 Protected Folder



- A place for members of Workgroup 1 to develop documents
- Members can make comments and edits to documents
- Only Workgroup 1 can see these files
- Workgroup 1 members cannot go into other Workgroup's protected files



# Workgroup Teams Website

## Other Workgroup's Materials

- There is a folder called All Workgroup Documents
- Each of the five workgroups has a separate folder inside this folder
- You can look at the documents and materials other workgroups place in their folder
- You cannot edit or leave comments in these documents
- Items you might see from other workgroups are things like survey responses and completed data requests

Documents > <b>General</b>			
	Name ▾	Modified ▾	Modified By ▾
	All Workgroup Documents	6 days ago	Kasrovi, Kiana

## How to get help

- We recorded a Help Session held on 10/24
- It offers instructions and answers to questions
- It is in the Instructions folder in the Teams site
- You can also contact Kiana Kasrovi at Manatt for help

# Upcoming Workgroup Meetings\*



- Friday, November 22, 2024
- Thursday, December 19, 2024
- Tuesday, January 28, 2025
- Thursday, February 20, 2025

\* Note: All Meetings are 12:00 – 3:00 PM

# Thank you!

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

Wednesday, November 6, 2024

10:00 a.m. – 3:30 p.m.

Location: Virtual Only

For more information visit the [Master Plan web page](#).

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



# 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 Q&A