SYSTEMS OF CARE

FOR CHILDREN AND YOUTH

System Profile: Regional Center – Lanterman Act Services*

The Department of Developmental Services (DDS) is responsible under the Lanterman Developmental Disabilities Services Act (Division 4.5, commencing with Section 4500, of Welfare and Institutions Code) to oversee the coordination and provision of services and supports to over 330,000 Californians with developmental disabilities, which include cerebral palsy, intellectual disability, autism, epilepsy and related conditions.

Services and supports are offered through a statewide network of 21 contracted, private, nonprofit community agencies, known as regional centers, which develop, purchase, manage and coordinate local services and resources. Regional centers have offices throughout California to provide a local resource to help find and access the many services available to individuals and their families.

Eligibility is established through diagnosis and assessment performed by a regional center. A listing of regional center phone numbers, locations, and areas served can be found online at: <u>https://www.dds.ca.gov/RC/RCList.cfm</u>

Individuals can be referred at any age. Individuals from birth to 36 months are automatically assessed for Early Start eligibility within a 45-day timeframe (see Early Start program). Individuals age three and over are assessed for "Lanterman" eligibility. After contacting the regional center, a regional center staff member is assigned to complete the process of determining eligibility. The parent/legal

OVERVIEW

Our goal is simple: our programs must meet the needs of the children and youth we serve. These are our collective children, and they all deserve the very best.

We recognize that it is our obligation to ensure that the services we are providing are coordinated, timely, and trauma-informed. We must come together as one government to break down silos and build a culture that is focused on delivering services that are person-centered and not program-centered.

PURPOSE

As a resource to state, county, and local staff, we developed system profiles that provide an overview of the services offered by our various systems that all serve children and youth.

This is our compendium of resources available to children and youth served by are various systems. The system profiles outline how eligibility is determined, what the denial appeal processes entail, how the system interacts with other systems or programs, how information is shared, and how referrals are made

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*This document provides a summary of Regional Center – Lanterman Act Services. It is not an exhaustive review of all relevant legal authorities and does not constitute legal advice.

representative or individual age 18 or over must sign a consent for the assessment to begin.

Initial intake must be performed within 15 working days following request for assistance. If an assessment is needed, the assessment must take place within 120 days following intake. The assessment must be performed as soon as possible and in no event more than 60 days following initial intake where any delay would expose the client to:

- Unnecessary risk to his or her health and safety, or
- Significant further delay in mental or physical development, or

The client would be at imminent risk of placement in a more restrictive environment.

ELIGIBILITY CRITERIA

Qualifying disabilities include intellectual disabilities, autism, epilepsy, cerebral palsy and other disabilities that closely resemble an intellectual disability and/or result in the individual requiring similar services to an individual with intellectual disabilities.

To receive regional center services, an individual must have a qualifying disability that originates prior to age 18, is expected to be lifelong and constitutes a substantial disability for the individual.

"Substantial disability" means the existence of significant functional limitations in three or more of the following areas of major life activity, as determined by a regional center, and as appropriate to the age of the person:

- (A) Self-care.
- (B) Receptive and expressive language.
- (C) Learning.
- (D) Mobility.
- (E) Self-direction.
- (F) Capacity for independent living.
- (G) Economic self-sufficiency.

Section 4643.5(a) of Welfare and Institutions Code states: "If a consumer is or has been determined to be eligible for services by a regional center, he or she shall also be considered eligible by any other regional center if he or she has moved to another location within the state."

Section 4643.5(b) of Welfare and Institutions Code states: "An individual who is determined by any regional center to have a developmental disability shall remain eligible for services from regional centers unless a regional center, following a comprehensive reassessment, concludes that the original determination that the individual has a developmental disability is clearly erroneous."

The regional center provides case management and other needed services, which continue through the individual's lifetime, as long as they are eligible. Services to be funded by the regional center are determined by an interdisciplinary team through the Individual Program Plan (IPP) process based on individual preferences and needs. A list of regional center services and descriptions is available in 11 languages online at:

https://www.dds.ca.gov/RC/RCSD.cfm

DENIAL OF ELIGIBILITY

The parent/legal representative, child welfare social worker, or individual age 18 and older that requested the eligibility determination is notified of the regional center's determination.

If denied eligibility, the parent/legal representative, child welfare social worker, or an individual age 18 and older have the right to request a due process hearing, mediation and/or file a State complaint if they disagree with the regional center's decision.

APPEAL PROCESS

The regional center is contacted in the event of any of these concerns. The Fair Hearing process is used to resolve disputes about eligibility or the nature, scope, or amount of services and supports for individuals age three-years or older. The Fair Hearing process includes a voluntary informal meeting, mediation, and a Fair Hearing. (https://www.dds.ca.gov/complaints/complt _fh.cfm)

Any applicant, recipient of services, or authorized representative may file a request for a Fair Hearing. The request must be in writing (form—DS 1805) and filed with the regional center within 30 days after notification of a decision or action with which there is disagreement. A Fair Hearing process brochure which describes all aspects of the process is provided by the regional center to the applicant.

(https://www.dds.ca.gov/complaints/docs/e nglish_fairhearingbrochure.pdf)

To resolve the issues of appeal, a voluntary informal meeting will be offered by the regional center. If this is declined by the applicant, or the applicant is dissatisfied with the decision of the regional center following an informal meeting, then mediation can be requested or one can proceed directly to a Fair Hearing. If mediation is requested, the regional center may accept or decline the request.

An Administrative Law Judge presides in the Fair Hearing process. The judge is employed by the Office of Administrative Hearings. A final decision must be rendered within 90 days of receipt of the Fair Hearing request form by the regional center. This 90-day time limit may be extended if requested by the applicant.

Current services will be continued during the appeal process if the request for a Fair

Hearing is postmarked or received by the regional center within 10 days after the written notice of a decision or action with which there is disagreement is received by the individual requesting the hearing. This is referred to as "aid paid pending."

PROGRAM INTERACTIONS

Regional centers rely on individuals and families to share information about what services they or their child has received or is receiving through other programs. If the individual or parent/legal representative provides consent, support networks may also be a source of information. State law (Section 4659 of Welfare and Institutions Code) does not allow regional centers to pay for services for which another agency has responsibility, and are referred to as "generic services." With individual or family consent, regional center staff will contact other programs to assist the individual or family in navigating those programs. Examples of generic services include but are not limited to:

Medi-Cal Managed Care - Regional centers may recommend that parents access Medi-Cal services for their child through a managed care plan if the child is determined eligible for Medi-Cal through the County and is enrolled in a plan. All regional centers are Memorandums reauired to have Of Understanding (MOUs) with managed care plans to facilitate service delivery for all Medi-Cal eligible individuals. If a regional center wants to assist an individual in requesting services, the regional center can call the specific plan's Member Services number or receive help from the Department of Health Care Services, Office of the Ombudsman at 1-888-452-8609.

Medi-Cal Fee-For-Service – Regional centers may recommend that parents access these services if their child is determined eligible for Medi-Cal through the County and the provider is enrolled in Medi-Cal. A complete list of Medi-Cal fee-for-service providers is located at the California Health and Human Services Open Data Portal under "<u>Profile</u> <u>of Enrolled Medi-Cal Provid</u>ers".

Medi-Cal Specialty Mental Health/Substance Use Disorder Services – Regional centers may recommend that a family access these services through the County behavioral health system. All regional centers are required to have MOUs with County behavioral health systems. A managed care plan may also make a referral for the individual to the County behavioral health system.

Child Welfare Services – Regional centers may participate in Child Family Team (CFT) meetings upon verification of the County's legal authority for an individual. Section 4643.5(d) of Welfare and Institutions Code contains procedures and timelines that apply to a child who transfers from one regional center's catchment area to another when there is an order for foster care placement, the child is awaiting foster care placement or the child is placed in out-of-home care through a voluntary placement.

In summary, the county social worker/probation officer shall send immediate notice to the youth's regional center of origin. In turn, the regional center of origin will immediately send notice, records, current IPP/Individualized Family Service Plan (IFSP), etc. to the receiving regional center. Within 14 days of receipt of transfer notice, the receiving regional center will send the originating regional center information on vendors and services to meet the youth's needs. The originating regional center will make every reasonable effort to initiate services as prescribed by the IPP/IFSP no later than 30 days following receipt of notice. If all services prescribed by the the IPP/IFSP have not been initiated within 30 days, the originating regional center shall in writing report to the court and the county social worker/probation officer upon the first 30

days, and every 30 days after until all services have been initiated.

Rehabilitation – Regional centers may refer an individual to the Department of Rehabilitation to access services.

Schools – Regional centers may participate in Individualized Education Program (IEP) team meetings when invited by an individual or family. Section 7579(a) of Government Code provides that regional centers and other specified public agencies notify the administrator of the special education local plan area (SELPA) prior to a child's out-ofhome placement.

INFORMATION SHARING

Unless parents/legal representatives provide consent, regional centers do not directly receive health screening information from primary care physicians and other providers. Regional centers rely on individuals and families to share information about what benefits, services or screenings they or their child has received and is receiving through other programs. When a family provides consent, regional center staff will interact with other programs (for example, attend CFT or IEP meetings).

Due to local relationships and MOUs, the process for sharing information with other programs may vary across regional centers and the catchment region.

Regional centers receive Medi-Cal eligibility information from DDS as part of the operation of the various waiver programs that fund services.

Additionally, Section 4514(I) of Welfare and Institutions Code permits information and records obtained in the course of providing intake, assessment, and services to persons with developmental disabilities to be disclosed in specific circumstances, including:

Between persons who are trained and qualified to serve on multidisciplinary

personnel teams, as defined in subdivision (d) of Section 18951. The information and records sought to be disclosed shall be relevant to the prevention, identification, management, or treatment of an abused child and his or her parents pursuant to Chapter 11 (commencing with Section 18950) of Part 6 of Division 9.

Welfare and Institutions Code Sections 18951(d)(4) and 4514(l) do not require the formation of a multidisciplinary team (MDT); however, it requires that the person be trained and qualified to serve on a MDT. Therefore, this section permits the release of the eligibility determination from the regional center to the Child Social Worker. Additionally, the regional center can always release with authorization.

EXISTING COORDINATION POINTS

Regional centers coordinate transition of a child to local education agency services at 36 months. Additionally, regional centers will participate in an individual's IEP meetings with local education agencies as part of the transition to Postsecondary Education and Employment when the individual or family provides consent.

Families can invite regional center staff to attend other programs' evaluations of the needs of a child or can provide any written reports to the regional center.

REFERRALS

The regional center service coordinator provides the referral information for generic services directly to the family. With the permission of the individual or a parent/legal representative the regional center makes direct contact with an agency or organization to assist the family. The referral may be noted in case notes or in the IPP.

When the IPP identifies a Purchase of Service referral, where services are arranged and

paid for by the regional center, the referral is provided directly to the vendor/provider and it is tracked through regional center financial and case management systems.

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Our Systems of Care work has been accelerated by the implementation of <u>Assembly Bill 2083</u> (Chapter 815, Statutes of 2018), which requires each county to develop and implement a Memorandum of Understanding outlining the roles and responsibilities of the various local entities that serve children and youth in foster care who have experienced severe trauma.

The legislation is focused on the child welfare system, but can and must be expanded to look at children and youth served by various other systems.

The legislation calls for the establishment of a Joint Interagency Resolution Team to provide guidance, support, and technical assistance to counties with regard to trauma-informed care to foster children and youth.

We have identified the mission of the State Restitution Team to be:

- Promote collaboration and communication across systems to meet the needs of children, youth and families;
- 2. Support timely access to trauma-informed services for children and youth; and
- Resolve technical assistance requests by counties and partner agencies, as requested, to meet the needs of children and youth.

For additional system profiles, including mental health services, rehabilitation services, developmental services and education services, please visit our website at www.chhs.ca.gov.