

2024 – 2025 PROGRAM PRIORITIES

We at the California Health and Human Services Agency remain committed to advancing our vision of a Healthy California for All through our guiding principles and strategic priorities.

Together, we have an opportunity to reshape the future of our state, and an opportunity to build a more just and inclusive California.

- 1 Building a more equitable system of service delivery for people with intellectual and developmental disabilities.
- 2 Establishing a local aging network that creates a more seamless experience of home and community-based services.
- 3 Improving outcomes for children and youth in the foster care system through payment reform.
- 4 Modernizing our behavioral health system to provide services to help anybody, anywhere, anytime.



GUIDING PRINCIPLES

Focus on Equity

Actively Listen

Use Data to Drive Action

See the Whole Person

**Put the Person back in
Person-Centered**

**Cultivate a Culture of
Innovation**

Deliver Outcomes

We are excited to augment our existing CalHHS focus areas with the following four priorities for 2024-2025. Please see this as an invitation for stakeholders and partners to join us in connecting these efforts to our existing work across CalHHS and throughout California communities. We hope you join us in shaping the final form of these efforts as we use them to pursue more fully a true Healthy California for All.



Building a more equitable system of service delivery for people with intellectual and developmental disabilities.

In early 2024, CalHHS and our Department of Developmental Services will launch the creation of the Master Plan for Developmental Services. This Master Plan will create the road map to modernize and improve the decades old system that delivers critical developmental services to hundreds of thousands of Californians.

Built upon recent historic investments to increase rates within the developmental services system the Master Plan will leverage these investments to strengthen accessibility, quality, and equity across services. Furthermore, in recognition that California's developmental disabilities system is deeply connected to other health, social and educational systems, the Master Plan will seek to create and strengthen bridges that connect the developmental services system to other critical systems.

The modernized system will seek to utilize existing system components including our 21 regional centers to deliver more equitable, consistent, accessible services to achieve improved and more reliable outcomes for all developmental service system consumers. Our goal is to realize a system where the state pays for services based on quality, outcomes, and cultural competence, rather than simply based on volume.

Working with a broad range of stakeholders including consumers and their families, services providers, workforce entities, regional centers, and advocates, we expect to implement a 21st century developmental services system that sets higher expectations and delivers wholistic and person-centered services to individuals and families.

Together we hope to improve access to quality, value-based services; improve measurable outcomes for individuals and their families; better leverage federal reimbursements as a source of financing for services; and improve the integration of developmental services with the physical and behavioral health systems in which this administration has invested so heavily.

The Master Plan will include concrete implementation steps of current investments and initiatives, while outlining additional steps to bolster outcomes for individuals and families, while enhancing regional center accountability and oversight.

NEXT STEP:

CalHHS and the California Department of Developmental Services will appointment a Stakeholder Working Group that will be tasked with drafting the Master Plan.



Establishing a local aging network that creates a more seamless experience of home and community-based services.

The network of Area Agencies on Aging was developed in 1978. Since then, new generations of older adults, people with disabilities, and caregivers have carried different life experiences, economic and social needs, cultural preferences, and consumer expectations. Our daily lives have transformed with numerous new technologies; a widened gap between high- and low-income residents; increased natural disasters because of climate change; and a shift of the health sector and family structures. These changing needs necessitate an improved network to support older adults and people with disabilities in the community.

As we look ahead to 2030, a quarter of all Californians will be over the age of 60. California's aging network must prepare for a growing population of older adults to situate itself within a more complex, integrated, and demanding future.

In light of the resources and attention devoted to aging and aging issues through the development of the state Master Plan for Aging and the COVID-19 pandemic, the time has come to modernize a nearly

50-year-old network of agencies and identify how it can evolve to meet the challenges of a future that looks very different than the past.

In 2022, we embarked on a journey with local partners to help us reimagine California's aging network as part of *California 2030*. These community conversations, backed by statewide survey data, provided us with significant insights into what is most important to older Californians, and centered the conversation in equity as we look towards the future.

We will propose a set of policies to reform the network and strengthen the governance system. Our goal is to modernize the organization of the system, set concrete performance standards, standardize the delivery of services across the state, and make the system easier to navigate for consumers and caregivers across the lifespan.

NEXT STEP:

CalHHS and the California Department of Aging will look to amend the Mello-Granlund Older Californians Act and offer technical assistance on the reauthorization of the federal Older Americans Act.



Improving outcomes for children and youth in the foster care system through payment reform.

Many youth in foster care, particularly those placed into congregate settings, have adverse long-term outcomes including increased risk of untreated or

undertreated mental illness, homelessness, and incarceration. California foster youth deserve better.

Recognizing the needs of this extremely vulnerable population of young Californians, the state has made significant changes to the way we care for children and youth in the foster care system. Over the last decade, the Continuum of Care Reform in California prioritized ending long-term congregate care placements in our foster care system and increased placing children and youth with loving relatives they already know.

Youth congregate care placement has decreased by almost 60 percent, while first placements and predominant placements into home-based settings have increased. Youth placed with relatives and extended family experience fewer health and mental health issues, better academic outcomes, greater placement stability, and a lower likelihood of re-entering care within 12 months of exit.

Despite our work, there are still too many young people placed into unfamiliar, restrictive, and often trauma-exacerbating settings. Although some young people benefit from short-term stays in intensive congregate settings, most do not. Building on the Continuum of Care Reforms, we propose to fundamentally change how we pay for foster care placements, focusing on the assessed needs of an individual child instead of on the placement type.

Reforms to foster care rates will support the individualized needs and strengths of

children and youth in the system, so they can be supported in a placement setting with relatives and extended family, as much as possible, leading to better outcomes. For example, utilizing the Child and Adolescent Needs and Strengths (CANS) assessment, a validated tool, to measure the strengths and actionable needs of the child and to pay for an appropriate placement and set of services based on the assessment findings.

Better supporting foster youth, particularly in supporting placements with family members known to the youth, will reduce the underlying trauma often associated with a foster care placement and will better support the physical, social, and emotional development of this group of vulnerable young people.

NEXT STEP:

CalHHS and the California Department of Social Services will release a framework for a new payment methodology for stakeholder feedback and engagement.



Modernizing our behavioral health system to provide services to help anybody, anywhere, anytime.

Our behavioral health work pulls every government lever we have at our disposal: setting a bold policy agenda, creating and implementing new initiatives, simplifying and streamlining programs, and enforcing laws and regulations. As we continue this journey, some changes will be immediate and visible, and others require more time.

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The truth is: We all struggle. At some point in our lives, we will all have a challenge with mental health or substance use ourselves – or be supporting a partner, child, neighbor, parent, friend, or coworker through their journey with behavioral health. The weight of this crisis is not carried equally. Communities of color, people involved with the justice system, and those who are LGBTQ+ carry the heaviest burden.

This next chapter of high value and impact implementation complements and builds on California's other major behavioral health initiatives: the California Advancing and Innovating Medi-Cal (CalAIM) initiative, the California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Demonstration proposal, the Children and Youth Behavioral Health Initiative (CYBHI), Medi-Cal Mobile Crisis and 988 expansion, the Behavioral Health Continuum Infrastructure Program (BHCIP), and Behavioral Health Bridge Housing (BHBH).

Over time, our work will lead California to a behavioral health system that: reduces misinformation, stigma and discrimination and increases support for care; reduces the time from symptom onset to treatment and increases ongoing engagement in care; reduces disparities in utilizing services among BIPOC and LGBTQ+ communities and increases access to culturally responsive care; reduces the criminalization of mental illness and substance abuse and increases high-quality community care placements;

reduces the risk of homelessness and housing insecurity and increases educational and employment opportunities; and reduces frustration in navigation of services while increasing satisfaction and trust in the quality of services received. We will create the behavioral health system for ALL Californians.

NEXT STEP:

CalHHS with its departments will continue to develop a roadmap for the implementation of all our connected behavioral health efforts.

ADDITIONAL RESOURCES

- ▶ Get more information about the [CalHHS Guiding Principles and Strategic Priorities](#).
- ▶ Get more information about the [Department of Developmental Services](#).
 - ▶ Learn about [California's Regional Centers](#).
- ▶ Get more information about the [Department of Aging](#).
 - ▶ Learn about [California's Master Plan for Aging](#).
- ▶ Get more information about the [Department of Social Services](#).
 - ▶ Learn about [California's Continuum of Care Reform](#).
- ▶ Get more information about the [Department of Health Care Services](#).
 - ▶ Learn about [California's behavioral health investments](#).