

Per California Code of Regulations, title 2, section 548.5, the following information will be posted to CalHR's Career Executive Assignment Action Proposals website for 30 calendar days when departments propose new CEA concepts or major revisions to existing CEA concepts. Presence of the department-submitted CEA Action Proposal information on CalHR's website does not indicate CalHR support for the proposal.

**A. GENERAL INFORMATION**

1. Date

2026-05-06

2. Department

Department of Developmental Services

3. Organizational Placement (Division/Branch/Office Name)

Statewide Clinical Services Division/Safety Net Branch

4. CEA Position Title

Branch Chief

5. Summary of proposed position description and how it relates to the program's mission or purpose. (2-3 sentences)

The Department of Developmental Services (Department) proposes a major change in concept and a level increase for the CEA titled Safety Net Program Manager, to be retitled to Branch Chief, Safety Net Branch. This CEA exercises executive authority to provide leadership, strategic planning, policy development, and direction for the Safety Net Branch, which will oversee the integrated statewide safety net and crisis services in the regional centers including System of Care, Aging Services, Behavioral Support Services, and Regional Projects. Consolidating policy development and oversight enhances statewide coordination, reduces redundancies, and ensures high-impact, consistent policies that support the Department's mission to deliver safe, effective, and seamless services for Californians with intellectual and developmental disabilities (IDD).

6. Reports to: (Class Title/Level)

Deputy Director, Statewide Clinical Services Division/3rd organization level

7. Relationship with Department Director (Select one)

- Member of department's Executive Management Team, and has frequent contact with director on a wide range of department-wide issues.
- Not a member of department's Executive Management Team but has frequent contact with the Executive Management Team on policy issues.

(Explain):

8. Organizational Level (Select one)

- 1st
- 2nd
- 3rd
- 4th
- 5th (mega departments only - 17,001+ allocated positions)

## B. SUMMARY OF REQUEST

### 9. What are the duties and responsibilities of the CEA position? Be specific and provide examples.

The CEA provides policy development and implementation, executive leadership and direct supervision of the Safety Net Branch including System of Care, Aging Services, Behavioral Support Services, and Regional Projects, ensuring consistent statewide implementation across 21 regional centers (RCs). This consolidated structure centralizes oversight of high impact programs serving individuals with the most complex behavioral, mental health, medical, and aging-related needs. Through this authority, the CEA establishes statewide policy standards, monitors performance outcomes such as crisis reduction, service timeliness, and placement stability, and directs corrective action to ensure compliance with statutory and regulatory requirements.

The CEA directs implementation and expansion of the Safety Net Plan by establishing statewide benchmarks for crisis prevention, mobile response timeliness, stabilization services, and structured post crisis transition planning. The position evaluates measurable outcomes including reductions in emergency department utilization, decreased reliance on restrictive placements, and improved continuity of care across service settings. When performance targets are not achieved, the CEA initiates policy revisions, program enhancements, and corrective strategies to improve statewide performance.

The position provides executive oversight of strategic planning, program implementation, and performance monitoring across all Branch programs and activities. This includes analyzing statewide data trends such as crisis utilization rates, service authorization delays, aging caregiver risk indicators, and behavioral health capacity gaps. Based on these findings, the CEA directs system improvements, aligns cross branch policy guidance, and oversees scalability of successful Regional Projects to ensure fiscal accountability and measurable return on investment, thereby reducing regional disparities in service access and quality.

The CEA leads cross system policy alignment with internal divisions and external partners, including RCs, the Departments of Social Services and Health Care Services, county behavioral health agencies, child welfare systems, first responders, and health care providers. Through development of interagency protocols, referral benchmarks, and shared accountability measures, the position improves service integration, reduces placement disruptions, and strengthens timely access to behavioral and medical support for high-risk individuals.

The CEA advises Department Executive Staff on Safety Net policy direction, prepares reports and presentations for control agencies, supports budget development and funding initiatives, and represents the Department before the Legislature as necessary. The position ensures alignment with statutory mandates and fiscal requirements, mitigating risk of audit findings, litigation exposure, funding impacts, and legislative scrutiny. The CEA also directs stakeholder engagement efforts to assess program effectiveness, promote transparency, and inform continuous policy refinement based on documented statewide outcomes.

Through consolidated executive oversight of the Safety Net continuum, this position carries expanded responsibility for statewide policy alignment, fiscal stewardship, system integration, and measurable performance improvement. The role has direct impact on the safety of individuals served, service stability, and quality of care for individuals with IDD who require high-intensity and complex support across California.

**B. SUMMARY OF REQUEST (continued)**

10. How critical is the program's mission or purpose to the department's mission as a whole? Include a description of the degree to which the program is critical to the department's mission.

- Program is directly related to department's primary mission and is critical to achieving the department's goals.
- Program is indirectly related to department's primary mission.
- Program plays a supporting role in achieving department's mission (i.e., budget, personnel, other admin functions).

Description: The Department is responsible for administering the Lanterman Developmental Disabilities Services Act (Lanterman Act) that provides for the coordination and provision of services and supports to enable Californians with IDD to lead more independent, productive, and integrated lives. California is the only state in the nation where the provision of services to persons with IDD has been deemed an entitlement program meaning that individuals will be supported in the least restrictive environment as a "civil right" and an individual entitlement.

The Safety Net Program mandated by Welfare and Institutions Code (WIC) 4474.15(a) is critical to the Department's mission because it ensures that individuals with the most complex needs receive timely, coordinated, and safe services across multiple systems of care. With the closure of the non-forensic developmental centers, the Safety Net services in the community are essential for preventing gaps in care, reducing risk, and maintaining continuity of services. This directly supports the Department's mission to help Californians with IDD lead safe, independent, and productive lives in the least restrictive setting.

The Department is committed to strengthening and evolving its safety net services by providing a range of community-based support to ensure individuals with co-occurring behavioral, mental health, and medical needs are identified early in childhood and adolescence, and that appropriate safety net and specialized services are available to provide a continuum of care throughout their lifespan. The safety net system recognizes that individuals with co-occurring behavioral and mental health conditions often receive services from multiple agencies, including mental health, special education, psychiatric, and mobile crisis services. The program services and activities are to ensure that individuals can access and move through the continuum of services in a fluid and coordinated manner, receiving tailored and appropriate levels of intervention and support.

In addition, the Safety Net program provides individuals, families, professionals, and direct support staff with the tools, skills, and interventions needed to prevent, identify, and de-escalate crises quickly and effectively. The Department under the policy leadership of this CEA continues to engage with individuals, families, RCs, professionals, advocates, and other stakeholders to identify strategies and potential service models, evaluate the effectiveness of existing models, and address the capacity of community safety net services and supports. This ongoing work is essential to maintaining and strengthening the service system and is directly aligned with the Department's mission to support individuals with IDD in safe, community-based settings.

**B. SUMMARY OF REQUEST (continued)**

11. Describe what has changed that makes this request necessary. Explain how the change justifies the current request. Be specific and provide examples.

The CEA was originally established as the Safety Net Program Manager in April 2018 responsible for policy development, oversight, coordination and implementation of statewide Safety Net Program services. The Department is proposing a reorganization of the Safety Net Program to consolidate and leverage multiple high-priority programs including System of Care, Aging Services, Behavioral Support Services, and Regional Projects into the Safety Net Branch reporting directly to the retitled Branch Chief. Previously, these programs operated independently with limited executive oversight from a single point of authority. This reorganization positions the CEA to provide executive-level oversight, strategic guidance, and policy recommendations for the integrated programs and activities in the Branch to ensure consistency, alignment with statewide priorities, and improved continuity of care for individuals with the most complex needs being served by RCs.

The expanded oversight responsibilities include guiding policy development, monitoring program implementation, ensuring cross-system coordination, directing stakeholder engagement, overseeing fiscal accountability, and promoting statewide consistency across multiple service delivery systems. For example, the CEA provides guidance on the System of Care to ensure coordinated support across RCs, county mental health departments, schools, crisis response entities, and other providers, particularly during high-risk situations. In Aging Services, the CEA advises on specialized support for older adults with IDD, including aging-in-place strategies, dementia-related supports, long-term care planning, and complex medical coordination. For Behavioral Support Services, the CEA monitors statewide adoption of behavioral health initiatives, crisis prevention strategies, provider capacity development, and integration of trauma-informed and positive behavioral support practices. In Regional Projects, the CEA provides recommendations on approval criteria, funding methodologies, performance metrics, evaluation standards, and scalability of innovative service models to strengthen community capacity and reduce reliance on restrictive placements.

As services continue to shift from institutional settings to community-based environments, centralized and coordinated oversight has become essential. The CEA over Safety Net now ensures seamless transitions for individuals moving across service settings, addresses emerging service gaps, and provides executive recommendations to align policy and practice across all Safety Net programs, services, and activities. This role requires high-level strategic planning, statewide policy alignment, interagency collaboration, fiscal accountability, and performance oversight, significantly expanding the scope and responsibility of the Safety Net leadership structure.

### **C. ROLE IN POLICY INFLUENCE**

12. Provide 3-5 specific examples of policy areas over which the CEA position will be the principle policy maker. Each example should cite a policy that would have an identifiable impact. Include a description of the statewide impact of the assigned program.

Safety Net Continuum – Implementation of the updated Safety Net Plan represents a significant policy shift from a crisis driven model, necessitated by the closure of developmental centers, to a prevention and de-escalation focused on continuum of care. This requires development of comprehensive statewide policies to ensure early identification of risk factors, standardized crisis assessment protocols, mobile crisis response requirements, stabilization services, and structured post-crisis transition planning across all RCs. Specific policies will establish uniform crisis response timelines, documentation and reporting standards, defined interagency roles and responsibilities, and integration of positive behavior supports and trauma-informed, culturally and linguistically appropriate practices. These policies will directly reduce reliance on emergency departments, psychiatric hospitals, Institutions for Mental Disease, and other restrictive settings by strengthening early intervention and diversion strategies statewide.

Children and Youth System of Care (AB 2083) Implementation – Provides executive level policy guidance and recommendations to align statewide efforts supporting foster youth with IDD who have experienced trauma. The CEA oversees coordination across RCs, child welfare, behavioral health, probation, and County Offices of Education, advising on referral benchmarks, eligibility coordination, joint case planning, and data-sharing protocols. This strategic oversight promotes consistent statewide implementation, reduces service delays, improves placement stability, and enhances long-term outcomes for youth with co-occurring trauma-related needs.

Behavioral Support Services – Monitors statewide implementation of behavioral health policies and provides strategic recommendations to ensure consistent adoption of functional behavioral assessments, positive behavior supports, provider qualifications, staff training, and quality assurance standards. Through oversight and guidance, the CEA ensures integration of trauma-informed and culturally responsive practices across all Safety Net programs, improving consistency of services, reducing crises, and supporting individuals with high-intensity behavioral and mental health needs in community-based settings.

Aging Services – Provides executive guidance on policy priorities for older adults with IDD, including aging-in-place standards, dementia screening protocols, long-term care planning, and structured transition planning. Through oversight and recommendations, the CEA ensures coordination with Medi-Cal, Medicare, and community-based service systems, as well as caregiver stabilization strategies. These policies support statewide continuity of care, reduce emergency placements, and promote long-term inclusion and independence for aging individuals with IDD.

Regional Projects – Oversees statewide Regional Projects, offering guidance and recommendations on approval criteria, funding methodologies, performance metrics, evaluation standards, and scalability benchmarks for innovative Safety Net service models. Executive oversight ensures that pilot programs are evaluated rigorously, scaled appropriately, and aligned with statewide policy priorities. These recommendations strengthen community capacity to serve individuals with complex behavioral, mental health, and social support needs while reducing dependence on restrictive placements.

These policy areas reflect the expanded statewide oversight role of the CEA by establishing the position as the principal authority for system-wide alignment, cross-branch coordination, policy recommendations, and strategic guidance across the Safety Net continuum for individuals with the most complex needs.

### **C. ROLE IN POLICY INFLUENCE (continued)**

#### **13. What is the CEA position's scope and nature of decision-making authority?**

The CEA position's scope and nature of decision-making authority is broad, strategic, and executive in nature, providing oversight, policy guidance, and recommendations for the Department's Safety Net continuum, which includes System of Care, Aging Services, Behavioral Support Services, and Regional Projects. These programs collectively serve individuals with the most complex needs across California, including children and youth in the child welfare system, adults with high-intensity behavioral and mental health needs, and a growing aging population with medical and dementia-related conditions. Services are delivered through 21 RCs and thousands of community providers statewide.

The CEA provides executive-level directions to ensure consistency, alignment with statewide priorities, and the adoption of best practices across the Safety Net programs and activities in the Branch. The position has authority to guide strategic policy decisions, develop and align Branch program priorities, advise on statewide performance standards, and recommend approaches for prevention, crisis response, stabilization, aging support, and community capacity initiatives. Depending on the issue, the CEA may independently propose policy direction or collaborate with other executive management, control agencies, and external partners to advise the Directorate on critical decisions affecting high-risk populations.

Key decision-making responsibilities include providing policy recommendations on crisis diversion and de-escalation strategies, overseeing alignment of System of Care policies under AB 2083, advising on aging-in-place and dementia response initiatives, and reviewing the evaluation, scalability, and funding of Regional Projects and innovative service models. The CEA monitors statewide data trends, identifies systemic service gaps, and recommends corrective actions while ensuring proposed policies are fiscally responsible, compliant with statutory requirements, and consistent with the Department's mission.

Additionally, the position anticipates and assesses emerging federal and state laws, regulations, budget actions, and cross-system policy issues, providing recommendations to the Directorate for program modifications, regulatory development, and long-term strategic planning. Through this oversight and advisory role, the CEA ensures that the Safety Net system remains responsive, sustainable, and capable of supporting Californians with IDD who require complex, high-intensity services.

#### **14. Will the CEA position be developing and implementing new policy, or interpreting and implementing existing policy? How?**

The CEA is responsible for both developing new policy and interpreting and providing guidance on the implementation of existing policies. In developing new policies, the CEA provides executive level direction to establish statewide frameworks, standards, and strategies across the Safety Net, including crisis prevention, stabilization protocols, aging-in-place initiatives, dementia supports, and evaluation and scalability of Regional Projects. Policy development is conducted collaboratively with program CEAs, RCs, advocacy organizations, and other stakeholders to ensure integration, culturally and linguistically appropriate practices, trauma-informed approaches, and alignment with statutory requirements.

For existing policies, the CEA provides executive oversight and guidance on interpretation and consistent implementation across all Safety Net Programs. This includes advising CEAs and program staff on AB 2083 requirements, WIC provisions, departmental directives, and integration with federal and state funding requirements. The CEA ensures that statewide policy application is aligned, coordinated, and monitored, providing recommendations to improve service delivery, compliance, and cross-system integration. Through this dual role, the CEA ensures that the Safety Net system effectively addresses the complex needs of Californians with IDD while maintaining legislative compliance, operational efficiency, and public trust.