

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

March 1, 2024

2. Department

Department of Developmental Services

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

Program Services/Policy and Program Development Division

4. CEA Position Title

Manager, Self-Determination Program Branch

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 (DDS) requests a major change in concept to the CEA, Assistant Deputy Director, Self-Determination Program (SDP) and Home and Community-Based Services (HCBS) and retitled to Manager, SDP Branch. The CEA is responsible for formulating, developing, implementing, and monitoring statewide policies and processes for implementation and expansion of the SDP and related initiatives. The CEA provides statewide leadership and direction and ensures a strong programmatic focus on person-centered service planning, service access and equity, and cultural and linguistic competence as well as uphold the values of the Lanterman Disabilities Services Act (Lanterman Act). The SDP is a critical program directly related to the DDS mission to ensure Californians with intellectual and developmental disabilities (IDD) have the opportunity to make choices and lead independent, productive lives as members of their communities in the least restrictive setting possible.

6. Reports to: (Class Title/Level)

Deputy Director, Policy and Program Development Division/3rd org 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 formulates, develops and implements policies and processes associated with the statewide SDP. The position provides statewide leadership and direction and ensures a strong programmatic focus on person-centered service planning, service access and equity, and cultural and linguistic competence as well as uphold the values of the Lanterman Act in support of the DDS Mission. Specific duties and responsibilities include: Develop and implement strategies, policies, and processes to ensure DDS and the Regional Centers (RC) successfully implement the SDP and to provide the infrastructure support for the program expansion and operation. Oversee all aspects of program administration and ensures there are methods to identify issues/barriers to successful implementation of SDP and works closely with community engagement groups and other DDS divisions for timely resolution of programmatic and administrative issues as they arise. This includes the policy development for directives to RCs on implementation of new and changing SDP administrative and program requirements and processes including guidance on obtaining service provider background checks, enhancements to support the SDP Local Volunteer Advisory Committees (LVAC), standardized vendorization packet and enhanced pre- and post-transition support services, and utilization of person-centered planning for both potential and enrolled SDP participants.

Develop and implement policies for new SDP initiatives including the development of standards and certification for Independent Facilitators (IFs) and Financial Management Services (FMS). Direct and oversee the work of contractors developing the standards and certification and in the development of the curriculum. Oversee the development of new data reporting systems to support the expansion of the SDP, and to provide for greater transparency and accountability in the SDP, and to provide reliable data for policy decisions, for monitoring and tracking participant outcomes and for identifying relevant data to address access and equity issues.

Oversee the activities of statewide RC agencies in relation to the SDP and related initiatives to ensure individuals served by RCs and their families can participate fully in the SDP. Oversee the provision of needed technical assistance and training to RCs, providers, disability advocates, and other community engagement groups on implementing SDP and the new initiatives and for compliance with the Medicaid laws and regulations and the conditions of participation under the SDP Waiver. Identify possible issues and ongoing support needs, consults with community engagement groups, and works to develop strategies to ensure that DDS policies, systems and processes support individuals in all demographic groups to enroll in the SDP and for successful SDP outcomes. Working in collaboration with other DDS divisions and community engagement groups, identify issues/barriers to successful implementation of SDP for timely resolution of programmatic and administrative issues as they arise.

Facilitate DDS established advisory committees and workgroups, including the DDS SDP Advisory Group, IFs and FMS focus groups, and other workgroup and community engagement meetings. Oversee the preparation of agenda and materials for SDP Committees, workgroups, community engagement meetings, legislative and budget briefings. Provide a subject matter expertise and communicates with the DDS' directorate and executive management team, Legislature, RCs, individuals served and their families and other community engagement groups regarding the status of DDS' efforts to implement and expand the SDP.

Plan, direct and oversee the activities of the Branch and provide guidance and direction to staff. Support the development of employee skills and knowledge. Develop and maintain long term goals and objectives for the Branch and allocate resources to address these priorities. Oversee the development of all necessary policy, regulations, standards, legislation, and procedures required to accomplish the goals of the Branch.

## 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 DDS oversees the coordination and delivery of services to over 400,000 individuals with IDD through a network of 21 RCs and over 24,000 community service providers under the Lanterman Act. DDS' mission is to ensure Californians with IDD have the opportunity to make choices and lead independent, productive lives as members of their communities in the least restrictive setting possible. The state's service system is designed to meet the needs and choices of individuals at each stage of their lives, and, to the extent possible, serve them in their home communities, providing choices that are reflective of lifestyle, cultural and linguistic backgrounds. Chapter 683 of 2013 (SB 468, Emmerson) created SDP to provide an alternative to traditional RC service coordination giving individuals greater control over which services they will receive and from whom. The SDP provides participants and their families increased flexibility and choice, and greater control over decisions, resources, services, and supports. The SDP Waiver was approved by the federal Centers for Medicare and Medicaid Services (CMS) in 2018 to provide federal financial participation for SDP services and permitted California to implement SDP. Following the 3-year implementation period of the SDP where the program was only available to 2,500 individuals, beginning July 2021, the SDP was available on a voluntary basis to all eligible individuals served by RCs (AB 136, Ch. 76, Sec. 48).

The SDP is considered a critical program by the Administration and Legislature and was advocated heavily by individual and disability advocates and viewed as a groundbreaking law to give people with IDD greater control and flexibility over the services they receive, how they receive them, and who provides them. SDP is built upon five principles of freedom, authority, support, responsibility and confirmation. With the receipt of appropriate supports and information, participants are tasked with managing their individual budget while developing a spending plan for the delivery of services and supports to achieve the goals and objectives of their Individual Program Plans (IPPs).

Despite the statewide availability of SDP in July 2021 there were delays in full implementation and a low number of individuals enrolling in SDP. The State has made numerous recent investments to support the long-term sustainability of the SDP. The 2020-21 Budget Act included \$4.4 million ongoing to support administration of the SDP and the 2022-23 Budget Act provided \$7.2 million ongoing to cover the costs of the FMS service for SDP participants outside of their individual budget.

The SDP is highly critical to DDS' mission as it provides participants and their families with enhanced opportunities to make choices in the development of their IPPs to best serve their lifestyle, cultural, and linguistic background needs in the least restrictive settings possible. Additionally, the SDP strengthens the RC system's capacity to enact core principles of self-determination and person-centered planning as well as ensuring service access and equity consistent with the Lanterman Act and DDS Mission.

## **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.

Recent new program initiatives, expansions, and need for increased policy workload in both the SDP and HCBS programs have resulted in too broad of a policy and management span of control for the current CEA. Therefore, DDS is establishing a new CEA for the HCBS Program titled Branch Manager, HCBS, and making a concurrent major change in concept and to retitle the ADD to Branch Manager, SDP. Changes specific to the CEA, SDP, include, but are not limited to the following:

SCDD Report to the Legislature on SDP Administrative Burdens – The SCDD issued a report to the Legislature dated June 30, 2023, mandated by WIC 4685.8(y)(3), titled An Evaluation of Participant Experience in California's Self-Determination Program on the status of the SDP and to provide recommendations to enhance the effectiveness of the program. In summary, the SCDD reported that "the problem with SDP is not the concept or its principles, but the administrative burden in obtaining and keeping SDP enrollment." Participants identified significant barriers and challenges with the SDP stating that the enrollment process and ongoing navigation of the program was time-consuming, labor-intensive, and demanding. Participants also stated there was a lack of sufficient support throughout various stages of the SDP and that information about and within the program is not readily available, with RC staff often lacking comprehensive knowledge of the SDP. SCDD made several recommendations including that RCs improve access to information about the SDP to new individuals served and families to the RC and during the IPP planning process and for the development of clear and accessible guidance materials. SCDD also recommended streamlining the enrollment process, developing clear timelines and deadlines for each stage of the enrollment process, and strengthening the oversight of the role of DDS to ensure consistent application of rules and processes across RCs centers to promote equity and fairness. Continuing Racial/Ethnic Disparities in SDP – The LAO in their report to the Legislature on DDS's 2023 Governor's Budget dated February 15, 2023, reported that the participant enrollment in SDP does not reflect the racial/ethnic composition of individuals served through DDS. The LAO noted that white individuals comprise a plurality of SDP participants (45%), despite making up only 30% of all DDS individuals. By comparison, individuals that identify as Latino comprise only 23% of SDP participants, but 40% of DDS' population. The LAO stated that these disparities "may speak to specific challenges in promoting the SDP to some communities." The LAO suggested that better understanding the drivers of disparities in SDP enrollment could help "DDS develop a coordinated plan for ensuring greater take-up of this program across all consumers." The SCDD in their June 2023 report to the Legislature also reported racial disparities in the participant enrollment in SDP and disparities in how the SDP is being implemented across RCs. The SCDD further reported that the high level of complexity and administrative burden in the program made the SDP less accessible to individuals for whom English is not their first language, and families with diverse socioeconomic and educational backgrounds. Budget Act Investments to SDP – The 2022-23 Budget Act included funding and trailer bill language to repeal the statutory requirement that FMS fees be paid from the SDP individual budget. RCs will pay the FMS costs outside of the participants' individual budget, easing access to SDP. The 2021-22 Budget Act included funding for enhanced support services for individuals and their families to assist with the transition into the SDP, statewide orientation and training materials and participant choice specialists at RCs to support individuals with timely transition to SDP participation and funding to contract with entities that will help provide orientation, training, and plain language informational materials. In addition to the funding, WIC 4685.8(r) was amended to require RCs to meet SDP targets and benchmarks, develop and implement an SDP outreach and training plan and other mandates for additional transparency and accountability in how RCs are implementing SDP. Rapid Expansion of SDP – Through increased efforts by DDS and the RCs for outreach and training on the SDP, there has been a recent rapid increase in the number of enrolled participants. The number of participants enrolled in SDP in June 2021 was 673, increasing to 2,046 in October 2022, and to 3,365 in September 2023. The growth in SDP participants between October 2022 and September 2023 is a 64% growth rate. With the current new initiatives and program changes, the number of participants enrolled in SDP is expected to continue. With this rapid expansion it has become evident that SDP's program infrastructure including administrative, program, and data reporting systems require further development. To build and support the SDP program and data infrastructure, six positions were redirected to SDP in 2023 equaling a 50% increase in staff positions. Standards and Certification of IFs and FMS Providers – Pursuant to WIC 4685.8(c)(1) and (2), significant policy work is required to first develop the standards for IFs and FMS providers and then to develop the statewide certification process. This will include developing the contract(s) request for proposal scope of work and evaluation criteria and overseeing the work of the contractors developing the standards and certification and in the development of the curriculum. Rulemaking Process - 2022 Budget Act TBL provided temporary authority to DDS to issue administrative program directives to implement and comply with the numerous program changes required for SDP implementation (WIC 4685.8(p)(2)).

## 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.

Standards and Certification of Independent Facilitators (IFs) and Financial Management Service (FMS) Providers – This CEA will be the primary policy maker in establishing mandated standards and certification requirements for IFs (WIC 4685.8(c)(2)) and FMS service providers (WIC 4685.8(c)(1)) to build an adequate network of providers with a focus on recruiting from underrepresented communities. These services are critical for a participant to be successful in the SDP. FMS services assist the participant in managing and directing the distribution of funds contained in the IPP budget and to ensure that the participant has the financial resources to implement their IPP throughout the year. IF services assist the participant in making informed decisions about the IPP budget, and in locating, accessing, and coordinating services and supports consistent with the participant's IPP. After establishment of the standards and certification with input from community engagement, further policy work will be required to develop the curriculum for a statewide training program for providers to obtain certification by demonstrating they meet the standards identified to provide the quality of services required for participants to be successful at meeting their IPP goals and outcomes.

Budget Act Investments to SDP – The 2022 and 2021 Budget Acts included funding to provide individuals served with greater access to SDP, enhanced support services for potential participants and their families to assist with the transition into the SDP, statewide orientation and training materials and participant choice specialists at RCs to support potential participants with timely transition to SDP participation and funding to contract with entities that will help provide orientation, training, and plain language informational materials. This CEA will be the primary policy maker for identifying the priority activities for use of these funds including developing guidance to RCs on their use of the funds, developing and implementing statewide orientation, informational and training materials, and for monitoring the RCs use of these funds.

Building a Sustainable SDP Infrastructure - Through increased efforts by DDS and the RCs for outreach and training on the SDP, there has been a recent increase in the number of enrolled participants. With this program expansion it has become evident that SDP's infrastructure including administrative, program, and data reporting systems require further development. To build and support the SDP program and data infrastructure, six positions were redirected to SDP in 2023 equaling a 50% increase in staff positions. This CEA will be the primary policy maker to identify the priorities and strategies for use of these new resources to best support the rapidly growing SDP. Specific examples include the development of an SDP data analytics and reporting system to include number and characteristics of participants by RC, types and amount of services and supports purchased under the SDP by RC, range and average of individual budgets by RC, and the number and outcome of SDP appeals by RC. The data and reporting system developed will be used for policy decisions, for required reporting to the Legislature on the SDP (WIC 4685.8(x)) and provided to RCs and the RC SDP LVACs to use in their mandated responsibilities for SDP and to address identified disparities.

Streamlined Administrative Processes – The CEA will be the primary policy maker to address the issues reported in the June 2023 SCDD report to the Legislature that identified significant barriers and challenges with the SDP stating that the enrollment process and ongoing navigation of the program was time-consuming, labor-intensive, and demanding. Participants also stated there was a lack of sufficient support throughout various stages of the SDP and that information about and within the program is not readily available, with RC staff often lacking comprehensive knowledge of the SDP. Specific examples of policies consistent with the SCDD recommendations include how the RCs can improve access to information about the SDP to new individuals served and families to the RC and during the IPP planning process, streamlining the enrollment process, developing clear timelines and deadlines for each stage of the enrollment process and developing clear and accessible guidance materials.

Addressing Racial/Ethnic Disparities in SDP – Both the LAO and the SCDD in reports to the Legislature reported that the participant enrollment in SDP does not reflect the racial/ethnic composition of the DDS overall individual served population. The CEA will be the primary policy maker in developing strategies, policies, and procedures to ensure that DDS policies, systems and processes support participants in all demographic groups and families with diverse socioeconomic and educational backgrounds to enroll in the SDP and for successful SDP outcomes. This will include significant community engagement to identify the possible drivers of the disparities and working in collaboration with community members and the DDS' Service Access and Equity Office on strategies, policies, and initiatives to effectively address the disparities such as tailoring supports to underserved communities by expanding the pool of providers who can meet the unique cultural and linguistic needs of these communities, by conducting targeted outreach campaigns, and by identifying how DDS and RCs can build capacity to support underserved communities in the SDP.

### **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 statewide, broad and expansive as it relates to formulating, developing and implementing policies for statewide implementation of the SDP that impacts RCs, current and future participants in the SDP and various community service providers and direct service professionals. The CEA's policy and operational decisions will directly impact the success of the SDP and promote quality services and outcomes for participating participants. Depending on the significance of the policy this CEA will have authority to independently decide policy options or to work in collaboration with other executive management and to advise the directorate on the most critical policy decisions.

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

The CEA will be developing and implementing new policy and also interpreting and implementing existing policies. There are current policies related to SDP including obtaining background checks, standardized vendorization packet, pre-enrollment SDP orientation, and guidelines for SDP RC LVACs.

The CEA will also be developing and implementing new policies including minimum standards and certification process for IFs and FMS providers and content of the training curriculum; increased outreach strategies to promote SDP to all demographic groups and families with diverse socioeconomic and educational backgrounds, and for changes in the state law, Budget Act investments, and from federal CMS impacting the SDP Waiver services.

The new policies will be developed and implemented with input from the Developmental Disabilities Task Force, Statewide SDP Advisory Committee, SDP LVACs, disability advocates, self-advocates, families and other community engagement groups and in coordination with the DDS Ombudsperson, and other DDS Program and Operations Divisions. In addition, the CEA will be in the lead policy role for the SDP rulemaking process, first by drafting directives to RCs and then in promulgating regulations for implementation and for on-going program needs and in response to law and budget changes.