**A. GENERAL INFORMATION**

<table>
<thead>
<tr>
<th>1. Date</th>
<th>2. Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>2022-05-25</td>
<td>Department of Developmental Services</td>
</tr>
</tbody>
</table>

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

Office of Community Development

4. CEA Position Title

System of Care Specialist

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 establishment of a CEA to serve as the System of Care Specialist responsible to formulate and develop policies to implement and sustain a high-quality continuum of care for enhanced care planning and consultation for DDS to better serve children/youth with intellectual and developmental disabilities (I/DD) that require complex care and coordination with all local child serving partners. This position will also oversee case-specific tracking, data collection and consultation, as well as coordination with regional center (RC) professionals, clinical professionals, and local county and educational partners.

6. Reports to: (Class Title/Level)

Deputy Director, Office of Community Development CEA B/3rd organizational 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)*: Has frequent contact with directorate on policies to serve youth with I/DD that require complex care

8. Organizational Level (Select one)

☐ 1st  ☐ 2nd  ☒ 3rd  ☐ 4th  ☐ 5th (mega departments only - 17,001+ allocated positions)
9. What are the duties and responsibilities of the CEA position? Be specific and provide examples.

Under general direction of the Deputy Director, Office of Community Development, the System of Care Specialist, formulates and develops policies to implement and sustain the requirements of Assembly Bill (AB) 2083 (Chapter 815, Statutes of 2018) and AB 153 (Chapter 86, Statutes of 2021) to provide System of Care technical and consultative assistance and continuum capacity analysis for DDS to better serve children/youth that require complex care and coordination with all local child serving partners. This position will also oversee case-specific tracking, data collection and consultation, as well as coordination with RC professionals, clinical professionals, and local county and educational partners. Specific duties and responsibilities include the following.

Develop policies and provide executive level subject matter expertise for implementation of the Administration’s objectives to protect children/youth with I/DD from abuse and neglect and to be safely maintained in their own homes whenever possible and appropriate. Develop policies and oversee consultative and coordinating activities with local community partners to increase engagement with children/youth in foster care and families receiving RC services to provide children with I/DD permanency and stability in their living situations and to preserve the continuity of family relationships and connections for children with I/DD. Develop policies to enhance families’ capacity to provide for their children’s developmental and behavioral needs and ensure children with I/DD receive appropriate services to meet their educational, physical and mental health needs; and to prepare youth with I/DD emancipating from foster care to transition into adulthood.

Develop and provide subject matter expertise on policies and best practices within the child welfare continuum to DDS and RCs. Provide policy recommendations that integrate the work of the State’s Children and Youth System of Care, informed by data and evaluation as well as lessons learned from the technical assistance provided to local agencies. Inform and oversee future work plans for technical assistance, training, policy development and research to sustain the work over time; lead, guide, and direct the workload, workflow, and processes for DDS’ role within the Children and Youth System of Care State Technical Assistance Team.

Liaison with the California Health and Human Services Agency (CalHHS) in the execution of initiatives to ensure all deliverables mandated per AB 2083 and AB 153 are completed on time and with high quality. Develop linkages to fellow departmental leaders leveraging expertise and supporting system integration. Evaluate best practices within California and other states in supporting children/youth with I/DD with trauma who are in foster care. Provide strategic advice and counsel to the directorate on options for RCs in coordinating and supporting youth in foster care. Work with DDS executive management to design policy and practice to improve responsiveness of child welfare services and achieve outcomes for families and children who receive RC services related to Safety, Permanence and Well-Being. Support Systems of Care alignment with the Department of Health Care Services (DHCS), the California Department of Social Services (DSS), and the California Department of Education (CDOE) to integrate best practices for operating a child welfare system supported by a trauma-informed comprehensive system of specialty mental health services, training, and resources. Research, analyze and collaborate with the State’s Children and Youth System of Care partners regarding laws and regulations across multiple programs. Coordinate with DDS subject matter experts on processes to maximize federal financial participation and support timely access to residential placements of consumers in foster care.

Provide consultation on youth with I/DD needs to DHCS and DSS regarding the Children’s Crisis Continuum Pilot Program for the purpose of developing treatment options that are needed to support California’s commitment to eliminate the placement of foster youth with complex needs in out-of-state facilities, including but not limited to consultation on operational procedures, performance and evaluation standards, and utilization criteria for participating entities in the pilot. As a member of the joint interagency resolution team, update and provide input on possible recommendations to the Legislature no later than December 31, 2022. Oversee support efforts related to tracking and annual reporting of deidentified information of children and non-minor dependents in foster care who have been assisted to preserve, or secure new, intensive therapeutic options.
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: This CEA position will be responsible for development of policies to implement and sustain the requirements of AB 2083 and AB 153 to provide System of Care technical and consultative assistance and continuum capacity analysis for DDS to better serve children/youth that require complex care and coordination with all local child serving partners. Of the approximately 59,826 children in California's foster care system, approximately 10,370 are children/youth with I/DD who receive services from DDS through the RCs established under the Lanterman Developmental Disabilities Services Act (Lanterman Act).

Lack of coordination among local agencies—including RCs serving individuals with I/DD—with joint responsibilities for providing housing, services, and supports for children/youth in foster care, is a major barrier to addressing the needs of these individuals and finding stable living arrangements in their home communities. Severely traumatized children and youth, typically having the most complex needs, face the greatest barriers to finding homes and services in non-congregate settings. The proposed CEA, in consultation and cooperation with RCs, involved state agencies, counties and designated stakeholders, will be responsible for DDS' role in successfully implement the requirements of AB 2083 and AB 153. These responsibilities include addressing issues of finding homes and services in the community of origin for children/youth who experience severe trauma, identifying gaps in services and placement options for children/youth in foster care who have experienced severe trauma, and driving recommendations for future state or legislative action to address these gaps.

This CEA is critical to DDS' mission. Further, this CEA is critical to the expansion of the Safety Net Program (WIC 4474.15(a)) with the goal to integrate and align the safety net continuum across systems to address the access gaps resulting from historically fragmented systems for individuals with I/DD, including children/youth in foster care and those who have experienced severe trauma and/or have complex case needs.
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.

With the closure of state-operated developmental centers, a developmental service “safety net system” was developed to be person-centered, trauma-informed, and to prevent or transition individuals from placements and interventions that are highly restrictive (WIC 4474.16). The safety net system was developed to support individuals who have I/DD and have co-occurring behavioral and/or mental health needs requiring supports from multiple agencies, including for mental health, special education, psychiatric, and crisis services.

AB 2083 required the Secretary of CalHHS and the Superintendent of Public Instruction to establish a joint interagency resolution (IR) team that consists of representatives from DDS and other state agencies. The primary roles of the IR Team are to develop guidance to local entities, including RCs, in developing memorandums of understanding (MOUs) and to provide technical assistance to counties to identify and secure the appropriate level of services to meet the needs of children and youth in foster care who have experienced severe trauma. The IR Team, in consultation with counties and designated stakeholders, are required to develop and submit recommendations to the Legislature and develop a multiyear plan for increasing the capacity and delivery of trauma-informed care to children and youth in foster care. DDS established a Staff Services Manager (SSM) II Specialist position to be the subject matter expert and lead staff representing DDS on the joint IR team and carrying out ongoing functions associated with implementing AB 2083.

AB 153 expands the requirements of AB 2083 and increases tracking and reporting requirements, adds continuum capacity analysis and consultative roles for DDS to better serve youth that require complex care. A CEA is required to implement the expanded requirements for DDS to provide policy guidance and direction for implementation of the Administration’s objectives to:

- Protect children with I/DD from abuse and neglect
- Have children with I/DD safely maintained in their own homes whenever possible and appropriate (limiting reliance on congregate care and increasing capacity for home-based family care)
- Increase engagement with children/youth in foster and families receiving RC services
- Provide children with I/DD permanency and stability in their living situations
- Preserve the continuity of family relationships and connections for children with I/DD
- Enhance families’ capacity to provide for their children’s developmental and behavioral needs
- Ensure children with I/DD receive appropriate services to meet their educational needs
- Ensure children with I/DD receive adequate services to meet physical and mental health needs
- Prepare youth with I/DD emancipating from foster care to transition into adulthood.

With the additional and expanded policy requirements in AB 153, a CEA position is required for ongoing and increasing policy and coordination functions for DDS and California’s Developmental Services Disability system. Consultation and cooperation with involved state agencies, counties, and designated stakeholders, is needed to successfully implement and sustain the requirements of AB 2083 to provide a System of Care technical assistance process available to all local child serving partners.

The Budget Act 2021, Provision 32, created staffing capacity for DDS to participate in consultation to DSS and to the local Children and Youth System of Care partners in their provision of a high-quality continuum of care for enhanced care planning and assessment services, consultation on service expansion for exceptional care and supervision needs for children with complex care needs and provide consult on the development of other exceptional community, educational, or family supports that have been identified as necessary to implement the provisions required in AB 153 in the implementation and allocation of complex care capacity expansion.
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.

This CEA will be the primary policy maker to integrate the objectives and work of the State’s Children and Youth System of Care (WIC 16521.6) into DDS and RC policies and operational procedures and to develop best practices as part of the child welfare continuum Examples of specific policies in this area include identifying RC responsibilities in the county MOUs as to obtaining consumer/family consent for sharing information with other entities and how to timely identify and access services for DDS consumers requiring services from multiple agencies. These policies impact the statewide success of the Administration’s goal that the programs meet the needs of the children/youth served.

This CEA will be the primary policy maker for DDS in working with DHCS and DSS on the Children’s Crisis Continuum Pilot Program (WIC 16553) for the purpose of developing treatment options that are needed to support California’s commitment to eliminate the placement of foster youth with complex needs in out-of-state facilities. DDS is a required participating entity (WIC 16553(f)) to develop and implement a highly integrated continuum of care for foster youth with high acuity mental health needs that permits the seamless transition of foster youth between treatment settings and programs, as needed for the appropriate treatment of the foster youth.

Examples of specific policies include criteria such as licensing requirements for appropriate placement options in California for placement of foster youth with I/DD and identifying options for required monitoring activities by the RCs to ensure the success of the in-state placement. Impact of these policies will have a direct impact on the health and safety of foster children/youth with I/DD and that these individuals receive timely and appropriate services to meet their educational, medical, and other service needs.

This CEA will be the primary policy maker on the development of coordinating activities with local community partners to increase engagement with children/youth in foster care and families receiving RC services to provide children/youth with I/DD permanency and stability in their living situations and to preserve the continuity of family relationships and connections for children with I/DD (WIC 16501).

Examples of specific policies include how RCs can timely identify state and local level services to complement the services that children/youth in foster care receive from RCs and strategies and measures to evaluate whether the services received meet the needs of the children/youth in foster care.

This CEA will be the primary policy maker for DDS as a member of the joint interagency resolution team (WIC 16521.6(b)(1)(A)) to provide technical assistance to counties to identify and secure the appropriate level of services to meet the needs of children/youth in foster care who have experienced severe trauma. Also, policy over the new requirement for tracking and reporting of deidentified information of children/youth with I/DD in foster care who have been assisted to preserve, or secure new, intensive therapeutic options.
C. ROLE IN POLICY INFLUENCE (continued)

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

The System of Care Specialist CEA will be responsible for policy development and executive level subject matter expertise to implement and sustain a high-quality continuum of care for enhanced care planning and consultation for DDS to better serve children/youth with I/DD. This includes policies required for mandated activities pursuant to AB 2083 and AB 153 including implementation of the Administration’s objectives to protect children/youth with I/DD; policies and best practices for DDS and the RCs to fully participate in the child welfare continuum; DDS’ role in the Children and Youth System of Care State Technical Assistance Team; and DDS’ role and consultation in the Children’s Crisis Continuum Pilot Program for the purpose of developing treatment options that are needed to support California’s commitment to eliminate the placement of foster youth with complex needs in out-of-state facilities.

As the policy and subject matter expert for DDS, this position 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. This position will provide a unified organizational response that crosses all divisions and programs.

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

The System of Care Specialist CEA is responsible for the development and implementation of new policy, and, as the subject matter expert, inform and recommend revision to existing cross cutting policies. New policies are necessary including for DDS’ participation in the development of the county MOUs that set forth the roles and responsibilities of agencies and other entities that serve children and youth in foster care who have experienced severe trauma and in the Children’s Crisis Continuum Pilot Program.

As the subject matter expert, informs on trends, emerging needs, and issues discovered through participation in the CalHHS System of Care initiatives to better serve children/youth that require complex care and coordination with all local child serving partners. This CEA ensures the policies, procedures and activities related to the implementation and monitoring of services for this population upholds the intent of the Lanterman Act including person-centered planning and culturally sensitive. The new policies will be developed and implemented with input from the Developmental Disabilities Task Force, other workgroups, disability advocates, consumers, families and other stakeholders and in coordination with the Community Services Division and other DDS Program and Operations Divisions.