

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

4/4/2025

2. Department

Department of Developmental Services

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

Program Services / Office of Statewide Clinical Services

4. CEA Position Title

Aging Services Branch Manager

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

The Aging Services Branch Manager will develop statewide policies and provide executive level statewide leadership and representation on the provision of services and supports for individuals who have intellectual or developmental disabilities (IDD) who are aging and/or aging caregivers. This position will provide policy subject matter expertise focused on resource and navigation needs of consumers and/or their caregivers who are aging as part of the Master Plan for Aging (MPA) (Executive Order N-14-19) affirming the priority of the health and well-being of older Californians who are aging and disabled. Additionally, this CEA will be responsible for policy development and implementation of support to the 21 regional centers (RCs) including, but not limited to, the following programs: Intermediate Care Facility regulations and program designs for individuals with IDD, RC dental liaison services, and Mental Health Services Act grant program.

6. Reports to: (Class Title/Level)

Deputy Director, Office of Statewide Clinical Services/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*): This position has frequent contact with the Directorate on policies to serve individuals with IDD who are aging and/or their aging caregivers focused on their resource and navigation needs consistent with the Master Plan for Aging.

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.

Develop, recommend, implement, and monitor statewide policies, procedures and activities related to services and supports for individuals with IDD who are aging and/or their caregivers consistent with the MPA. Develop and inform on policy solutions to improve access to services and support, create options through RCs, state-operated facilities and programs, and generic programs for these individuals. Serve as single point of contact and coordinator of the Department's goals and initiatives for individuals who are aging, with a focus on expansion of services and use of Community Resource Development Plan (CRDP) funding for creation of new community resources and supports for aging consumers. Develop and implement resource materials and trainings for RCs and the Department state-operated facilities and programs to ensure the needs of aging consumers are met. Develop and coordinate statewide training for the Department and RC staff on best practices, improving services, and developing community resources for older consumers as well as providing technical support to RCs and state-operated facilities and programs in addressing access, service gaps, and equity issues.

Provide executive level leadership, representation, project management and subject matter expertise on the provision of culturally and linguistically sensitive services and supports for individuals who are aging and have IDD. Lead and/or participate in the Developmental Services Task Force (DS Taskforce), and other workgroups to develop initiatives to expand services for aging consumers, including participation in collaborative multi-department efforts to implement the MPA. Liaison with the California Health & Human Services Agency (CalHHS) in the execution of initiatives to ensure all deliverables in the MPA are completed on time and with high quality. Collaborate and coordinate efforts with Department staff, Association of RC Agencies, RCs, community partners, University Centers for Excellence in Developmental Disabilities, Department of Aging (DOA), other state agencies, and other organizations to identify areas of emerging need. Consult on and develop innovative, multi-disciplinary approaches and methods of service delivery, including the expansion of aging services across the broad landscape in which services are offered statewide and across systems of care. Serve as lead representative for the Department in the Bridging Aging and Disability Network initiative grant program to strengthen the collaboration between disability and aging networks at the State level; and, to better support individuals with IDD and their caregivers as they plan for their future

Plan, set policy, direct, and oversee the activities of other Department health programs including, but not limited to: ICF regulations and program designs for individuals with IDD, RC dental liaison services, and MHSA grant program. Oversee regulatory work for ICF/IDD residential programs, review and approve ICF program designs, review and approve proposed ICF administrators, and in collaboration with nursing staff in the Clinical Services Branch review and approve medication training plans for ICFs. Oversee dental liaison services to the RCs to facilitate improved access to oral health care across the state for individuals served and for policy input related to oral health care, RC training, etc. Oversee and manage the MHSA grant program, under an ongoing 3-year grant cycle, including application reviews, grantee selection, and oversight of grant projects throughout the state. Oversee additional health policy related work including Behavioral Modification Reports, quarterly Community Living Options report, and ongoing bill analysis and health policy related work

Inform and advise management on complex issues and program strategies related to the growing number of individuals served who are aging. On behalf of the Directorate, coordinate Department-wide efforts to ensure the needs of aging individuals with IDD are met through the Developmental Disabilities Services System, through RCs, state-operated and generic programs. Advise Executive Staff on proposed policy, amendments to existing policy, and operational directives that impact services provided to aging individuals, many which have co-occurring conditions and receive services from multiple agencies and programs. Inform on the development of legislative and fiscal analyses, as needed. Frequently communicate with executive management, control agencies, the Legislature, RCs, consumers, and their families on Department initiatives and issues affecting the lives of aging individuals served and/or their aging caregivers.

Serve as a subject matter expert on current trends, literature and research, trends and issues, which may inform future service needs. Research other states' programs serving individuals who are aging. Prepare and present results of research and data analyses for the Directorate and/or Executive Staff. Independently prepare materials for presentation to RCs, community groups, advocacy organizations, legislative staff, and other entities concerning the needs and services provided to older individuals served. Actively participate in a variety of Department-led risk management activities. Participate on external panels and committees as needed. Provide ongoing direction, evaluation and contribute to creative process improvements, consistent with the Department's mission and goals, through the Department and community group meetings. Research, develop and draft a variety of materials and presentations on topics and best practices for services and supports for older individuals served and their caregivers who are aging.

**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's mission is to provide quality services to the people of California and assure the opportunity for individuals with IDD to exercise their right to make choices and lead independent, productive lives as members of their communities in the least restrictive setting possible. Under the Lanterman Disabilities Services Act (Lanterman Act), the Department contracts with 21 non-profit RCs statewide and oversees the coordination and delivery of services and supports at the local level to over 500,000 individuals with IDD throughout their lifetime. Through collaborative partnerships and initiatives, the Department provides dynamic, comprehensive services and supports through the service delivery system to meet the complex needs of California's highly diverse IDD population; supports choices for individuals at each stage of their lives, and, to the extent possible, serves them in their home communities, providing choices that are reflective of lifestyle, cultural and linguistic backgrounds. In California services and supports to individuals with IDD are provided in two ways, either in the community (i.e., family home, own home, licensed setting, etc.) for most individuals, or in state-operated facilities for a small portion of the population.

The Aging Services Branch Manager will provide executive level statewide policy leadership and subject matter expertise in support of programs and services for the increasing number of individuals served who are aging and/or their caregivers. This position will inform on and develop policies to ensure Department priorities align with the priority of the Administration and CalHHS by supporting the integration and linkage of the continuum of aging services to those services across both state and local agencies, including the blueprint for aging across the lifespan consistent with the MPA. The Administration's goal is to integrate and align the services across the continuum of systems to address the access gaps resulting from historically fragmented systems for individuals with IDD who are aging and/or their caregivers. The MPA is a priority to the Department, the Governor, and the individuals we serve.

## **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.**

As health care technology and services have improved, individuals with IDD are living longer and healthier lifespans that are close or equal to those individuals without IDD. However, evidence has shown that aging programs at both the State and Federal levels have not been prepared to provide suitable services to the IDD population. The Department is currently serving over 63,000 individuals who are aged 40 years old and older. Of these individuals, over 7,000 have Down Syndrome. Individuals with Down Syndrome are living longer due to medical advances, better healthcare, and available services. Scientists anticipate that “virtually all” individuals with Down Syndrome will experience some changes in brain structure that are characteristic of Alzheimer’s disease. On average, Alzheimer’s disease begins around age 50 to 55 years; however, for individuals with Down Syndrome the average age of onset is approximately 20 to 25 years before the average age of onset in the population without IDD. Diagnosing and treating Alzheimer’s disease among individuals with Down Syndrome is challenging. Also challenging is that California is faced with the need for additional program resources to identify and address clinical and other resource and support needs of this population and their caregivers. For other consumers currently cared for by aging parents, there is a critical need to identify available resources and advise on appropriate new supports. Of the over 60,000 individuals who are 40 years and older, over 24,000 live with a parent, family, or guardian. Therefore, it is likely that many of these individuals are living with caretakers who are entering or have entered their senior years.

In June 2019, Governor Newsom issued Executive Order N-14-19 calling for the creation of an MPA and a “blueprint” for state government, local government, the private sector, and philanthropy to prepare the state for the coming demographic changes and to continue California’s leadership in aging, disability, and equity. The Executive Order affirmed the priority of the health and well-being of older Californians and the need for policies that promote healthy aging. Key IDD community groups contributed input in the development of the MPA and there are shared cross-cutting issues with the DS Task Force that provides guidance on the delivery of services to Californians who have IDD. In January 2021, the Governor released California’s MPA that outlines five bold goals and twenty-three strategies to build a California for All Ages by 2030 with the Department being an active participant with specified actions and goals.

The MPA is a ten-year blueprint for advancing a California for All Ages and Abilities. In 2021-2022, ten Cabinet Agencies, in strong partnership with local leaders, the private sector, the federal government, and stakeholders, committed to more than 100 initiatives to launch the MPA into action. In 2023-2024, the Cabinet and partners committed to 95 new initiatives, demonstrating focus, innovation, and flexibility to meet the needs of California’s older adults, people with disabilities, and family caregivers. Elder justice is a core priority within the MPA and several of these initiatives address the protection of older adults from abuse, neglect, and exploitation. The MPA specifically calls for the creation of a California Elder Justice Coordinating Council (“Coordinating Council”) to increase coordination and develop recommendations to prevent and address elder abuse, neglect, exploitation, and fraud. The Department is a required participant on the Coordinating Council jointly led by CalHHS and the Department of Justice and is comprised of leaders from governmental and advocacy agencies and organizations across the state. Other MPA initiatives requiring the Department’s executive level involvement is to address the housing needs of older adults and people with disabilities by promoting statewide access to integrated models, including connections to social services, healthcare, housing, and home and community-based services in support of Californians remaining in their own homes and communities which directly supports the Department’s mission.

On January 30, 2023, the Department and DOA were selected as co-leads for the national Bridging Aging and Disability Networks grant funded by the Administration for Community Living. The goal of the grant is to strengthen the collaboration between disability and aging networks at the State level; and, to better support individuals with IDD and their caregivers as they plan for their future. The grant will provide California the opportunity to develop best practices, systems change, policy change, and other types of changes and training that will enhance and improve aging services to individuals with IDD and their families.

The Aging Services Branch Manager CEA will serve as a dedicated position within the Office of Statewide Clinical Services to address the changing support needs of individuals and caregivers as they age, coordinate implementation of the MPA, provide a leadership role for the Bridging Aging and Disability grant, and address the increasing needs for local resource development for this vulnerable population.

## 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 develop, recommend, implement, and monitor statewide policies for services and supports for individuals with IDD who are aging and/or their caregivers who are aging. These policies will have a statewide impact across the broad landscape of the Developmental Disabilities Service System for policies to improve access to services and support, to create service options through RCs, state-operated facilities and programs, and generic programs for these individuals to lead more independent and productive lives and support individual choices.

**Expanded Housing Options** – The Department has a statutory responsibility (WIC 4679(a)) to ensure that individuals with IDD live in the least restrictive setting, appropriate to their needs. The Department's CRDP provides funding and policy parameters for RCs to enhance the capacity of the community service delivery system and to reduce the reliance on the use of restrictive living environments. For aging individuals with IDD, particularly those with Down Syndrome, it is very challenging to find housing options that meet changing needs across the decades that are not in large institutions with restrictive settings (e.g., nursing homes). This CEA will develop policies and work with the Department's Office of Community Development to identify and/or create a wider range of housing options such as duplexes and accessory dwelling units to support multi-generational families and caregivers and new models of residential communities with a range of services needed for individuals with IDD who are aging and their caregivers. Expanded housing options for aging individuals served that allows for different household sizes, with accessible transportation options, welcoming parks and public spaces, and access to day services, and mental health and crisis services within individuals' communities are foundational for the well-being and continued inclusion of these individuals in all aspects of community and social life.

**Cross-Cutting Inclusion Strategies** - This CEA will develop and recommend policies for aging individuals served by the Department, particularly those with early dementia and other complex service needs, that improve the coordination of services and supports from multiple service agencies to ensure these individuals are provided all needed supports and services. To ensure the full inclusion of aging individual served by the Department in their communities, this CEA will recommend, develop, implement, and monitor statewide policies, procedures and activities related to services and supports that provide for fully accessible services to enable the individuals to remain living in their community of choice. A specific example is working with the Department of Health Care Services (DHCS) to ensure aging individuals are provided access to DHCS' CalAIM for Enhanced Care Management that addresses clinical and non-clinical needs of the highest-need Medi-Cal enrollees through intensive coordination of health and health-related services.

**Expansion of Safety Net Services** - 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 IDD and have co-occurring behavioral and/or mental health needs where supports from multiple agencies, including mental health, psychiatric, and crisis services are needed, as well as medically complex individuals, who are living longer. This CEA will be the primary policy maker in developing strategies and policies for expanding the Department's Safety Net to include aging individuals and/or their aging caregivers. These policies will include identifying new program components and initiatives for a more integrated, cross-system statewide approach to system linkage and navigation with RCs, providers and state and local partners for older consumers with the most complex needs requiring restrictive settings. Additionally, the safety net program requires continuous engagement with the community to identify strategies and potential models of services and supports, evaluate the effectiveness of existing models, identify gaps, and address the capacity of community safety net services and supports.

**Resources and Technical Assistance for Improved Services** - This CEA will develop resource materials for RCs and state-operated facilities and programs to ensure the needs of aging individuals are met. These resources will be developed based on this CEA's direct involvement with nationwide and statewide entities working on service needs for aging individuals with IDD, with Universities of Excellence, disability advocates, and other community groups. This CEA will also develop policies for statewide training of Department and RC staff on best practices, improving services, and developing community resources for older individuals served as well as providing technical support to RCs and state-operated facilities and programs in addressing access, service gaps, and equity issues.

The policy areas under this CEA will have a statewide impact across the broad landscape of the Developmental Disabilities Service System to improve access to services and support, to create service options through RCs, state-operated facilities and programs, and generic programs for aging individuals with IDD to lead more independent and productive lives and support individual choices. Additionally, this CEA's policies will support and align with the Governor's MPA and the need for a focus on safety net services for this fragile population.

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

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

The Aging Services Branch Manager will be responsible to develop and inform on statewide policies that impact access to and expansion of services and supports for individuals with IDD who are aging and receiving services through the RC delivery system and state-operated facilities and programs. This CEA will also, in collaboration with CalHHS, DOA, DHCS, Department of Social Services, and community agencies, inform on policies in other programs providing services and supports to individuals served by the Department who are aging such as Local Areas of Aging and CalAIM.

This CEA's decision-making authority will be within the area of expertise, providing consultation to and advice to the Directorate and Executive Staff on current and future service needs impacting individuals with IDD who are aging and/or their caregivers, and advise, develop or revise Department-wide policies or operational directives that may crossover into other service and program areas. The decisions made by this CEA will have a substantial impact on individuals with IDD who are aging and/or caregivers.

As the policy and subject matter expert for the Department 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 Aging Services Branch Manager will be responsible for the development and implementation of new policy, and, as the subject matter expert, inform and recommend revision to existing policy. New policies are necessary to implement a new scope of work including the initiatives under the MPA, and to expand the needed services and supports for aging consumers and caregivers. This CEA will inform on trends, emerging needs, and issues discovered through participation in the MPA and Elder Justice Coordination Council meetings, partnerships with other state departments and local agencies, and from interactions with disability advocates and other community groups. This CEA's policy actions will impact the broad landscape of the service delivery system including RCs, state-operated facilities and programs, and community providers of services. This CEA ensures the policies, procedures and activities related to the implementation and monitoring of services for individuals with IDD who are aging uphold the intent of the Lanterman Act.