

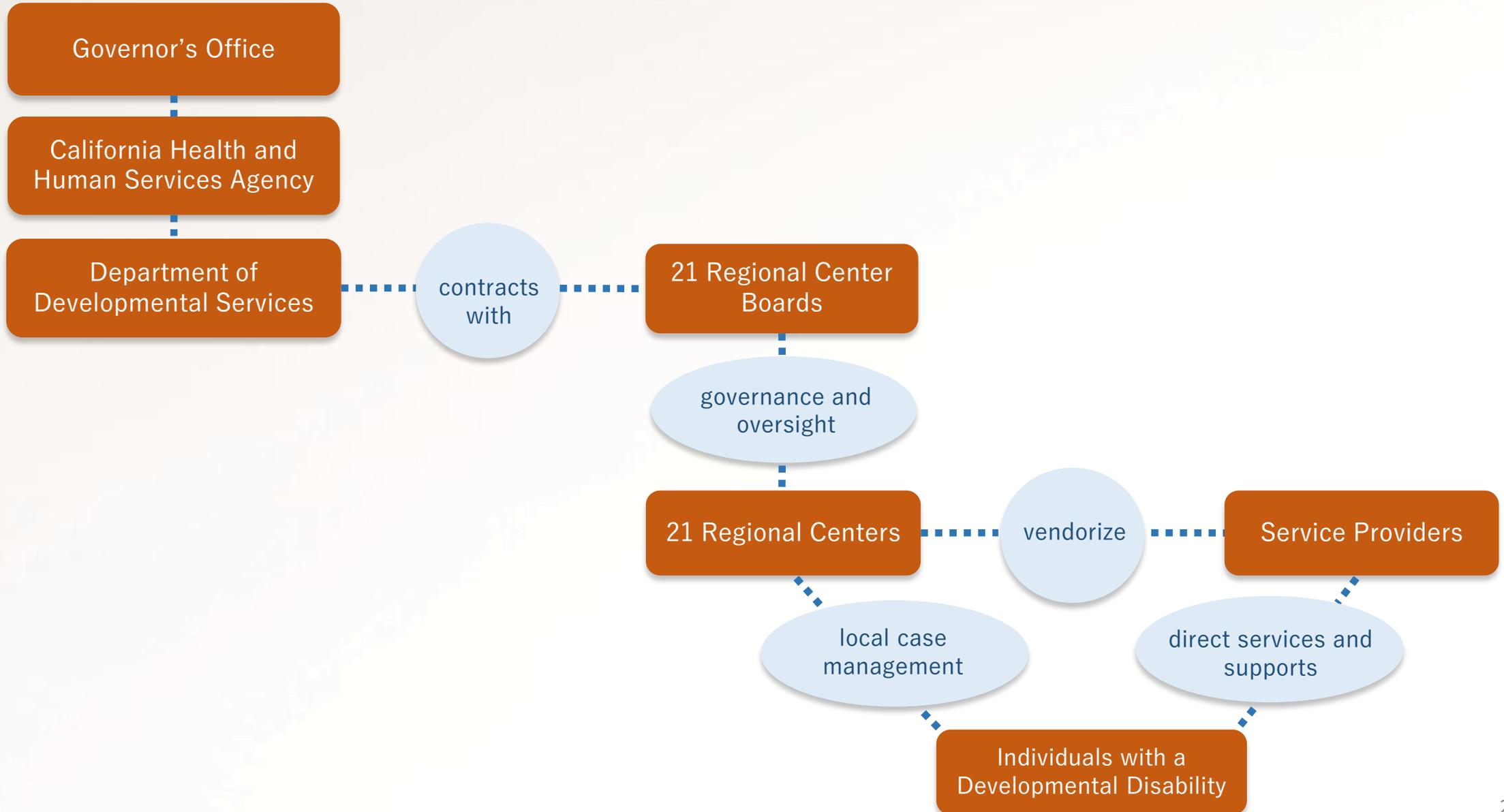


State Council on Developmental Disabilities

September 19, 2017

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Department of Developmental Services

Organization

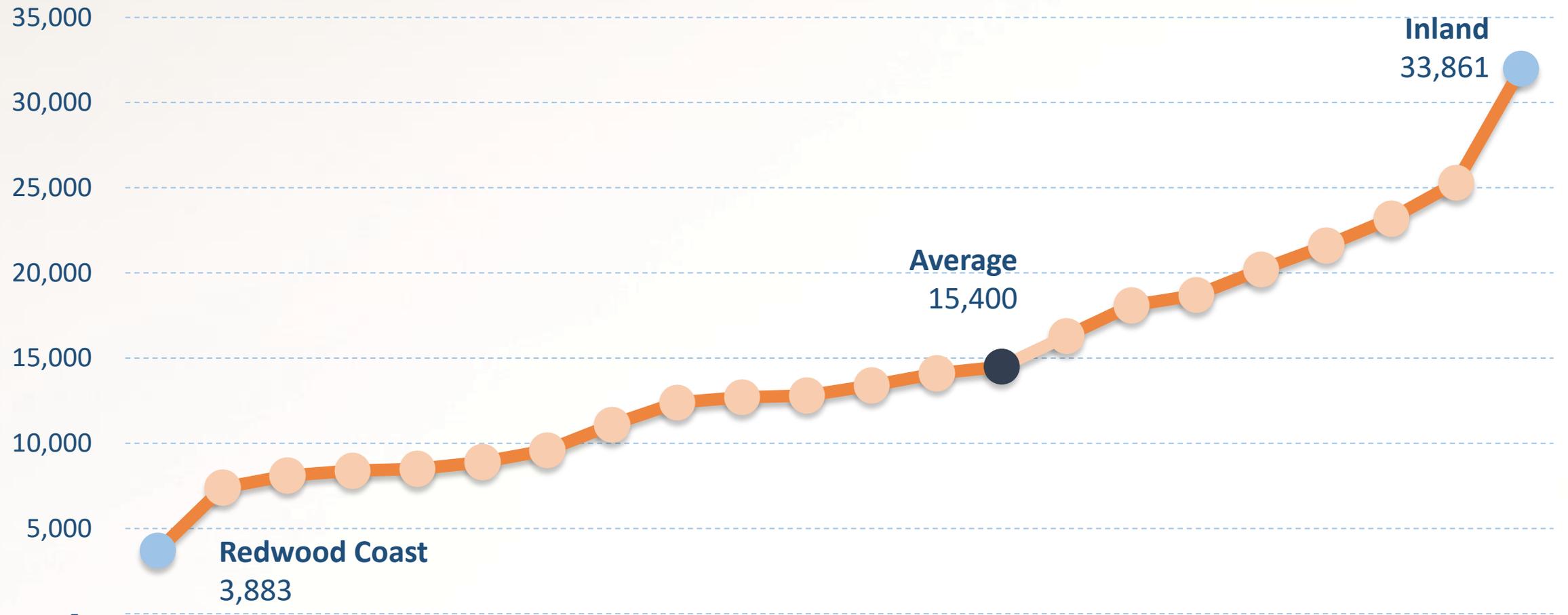


Developmental Service System

- Provides services and supports to over 300,000 individuals with developmental disabilities
- Offered through three state-run developmental centers (DCs), one state-run community facility and a network of 21 contracted non-profit regional centers (RCs)
- Since inception of the community-based services established by the Lanterman Act more than 50 years ago, California has been developing a system of community services and relying less on services from larger, state-operated facilities
- As California's community system expands, the DC population has declined, mirroring national trends
- The DC population has decreased from a high of around 13,000 residents in 1968, to 727 in August 2017

Stats

Regional Center Consumer Populations, August 2017



Growth Trend

Statewide Consumer Population, 2002-2017



Trends by Age Group

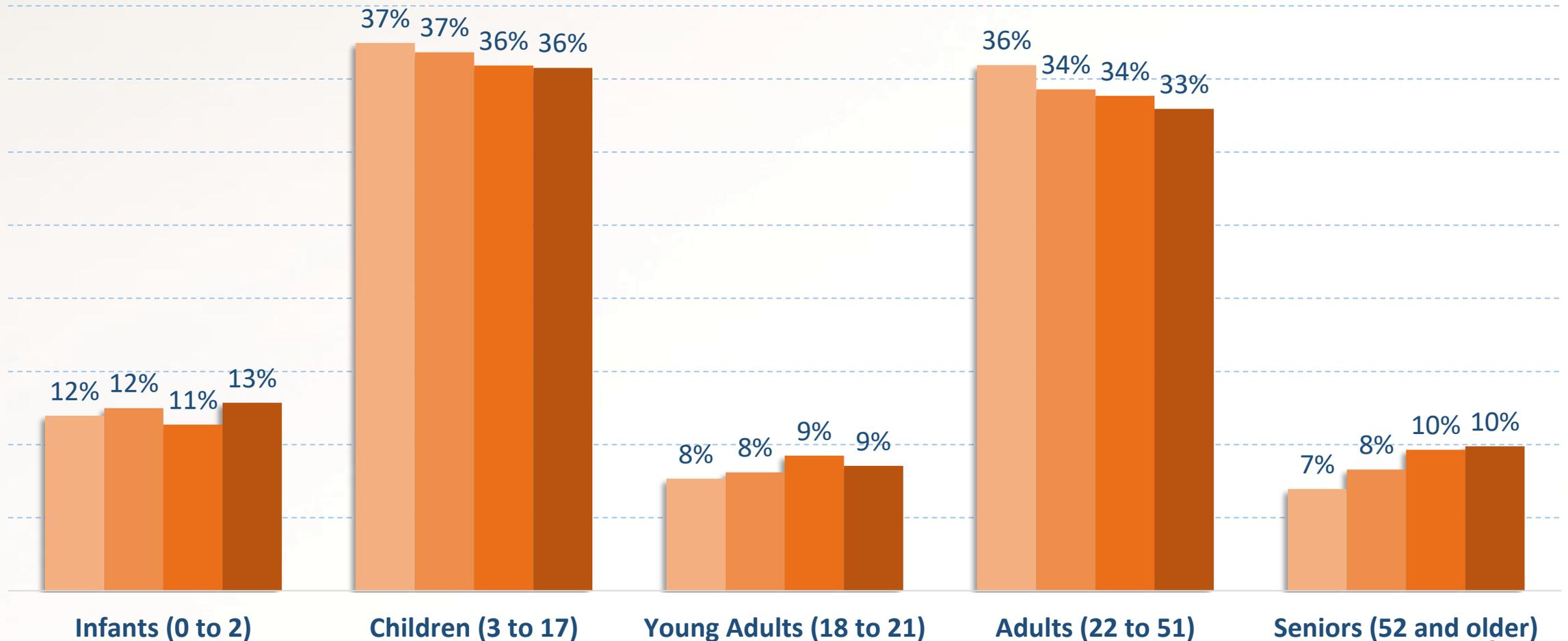
Statewide Consumer Population, 2002-2017

2002

2007

2012

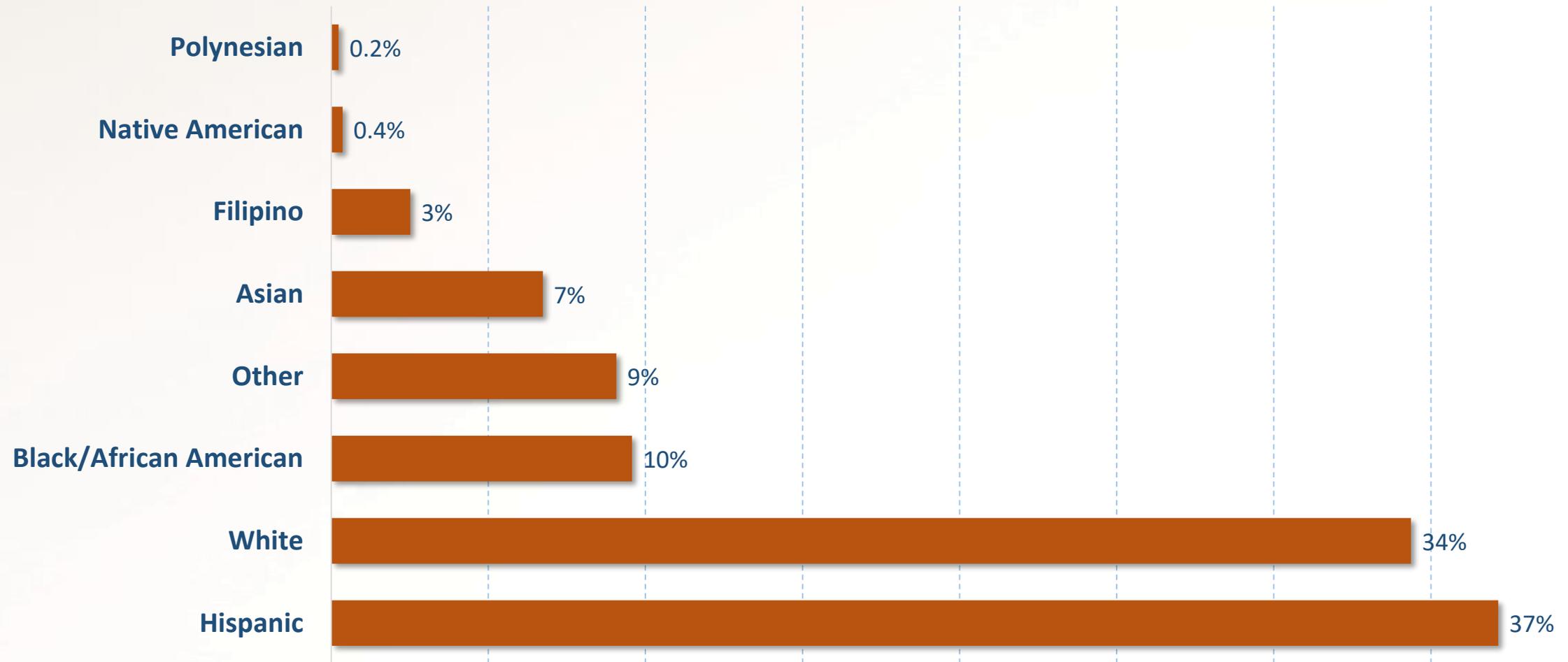
2017



Facts and Stats

Consumers by Ethnicity, March 2017

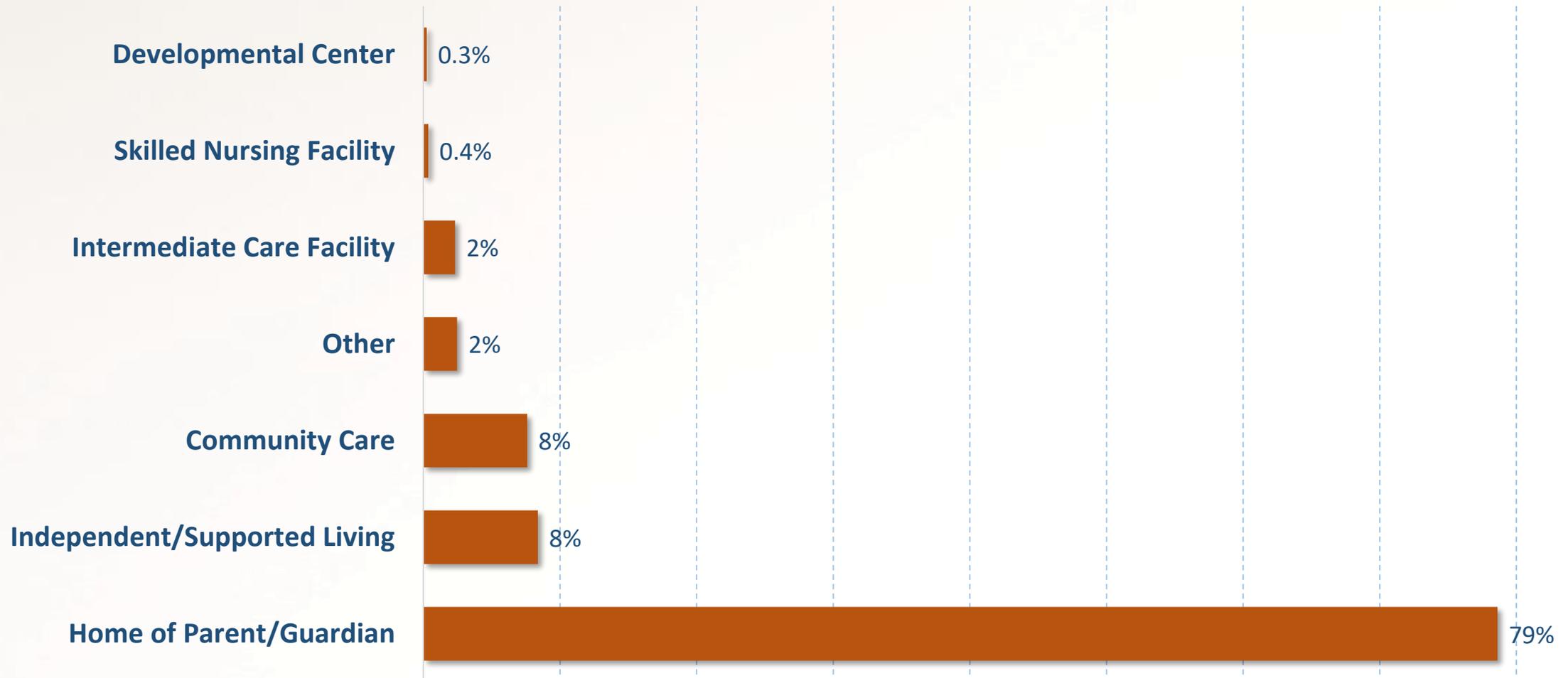
Statewide



Facts and Stats

Consumers by Living Arrangement, March 2017

Statewide



Background

- As of September 13, 2017
 - Porterville DC – 312 residents*
 - Sonoma DC – 250 residents
 - Fairview DC – 158 residents
 - Canyon Springs Community Facility – 47 residents
- DDS is in the process of closing the three remaining DCs

* 201 PDC Secured Treatment Program

DC and State Hospital Closures

- DeWitt State Hospital closed in 1972
- Stockton DC in 1995
- Camarillo State Hospital and DC in 1996
- Sierra Vista Community Facility in 2009
- Agnews DC in 2009
- Lanterman DC in 2014
- Sonoma DC scheduled to close by December 2018
- Fairview DC by 2019
- Porterville DC General Treatment Area by December 2021

By the end of 2021, all individuals with a developmental disability in California will receive services and be supported in community settings. Individuals will no longer receive services in a Developmental Center with the exception of Porterville DC Secure Treatment Program and the state-operated Canyon Springs Community...

DC Task Force

- In May 2013, the Secretary of CA Health and Human Services Agency announced establishment of the “Task Force on the Future of Developmental Centers” (DC Task Force)
- Chaired by the Secretary and composed of individuals with developmental disabilities, family members, advocates, providers, RC and state staff

DC Task Force

- A plan for the future of DCs
 - ✓ Addresses service needs of all DC residents and ensures the delivery of cost-effective, integrated, quality services
- The Task Force's "Plan for the Future of Developmental Centers in California" was released in January 2014
- Plan included six recommendations

Plan for the Future of Developmental Centers in California

Recommendation 1

- *More community style homes/facilities should be developed to serve individuals with enduring and complex medical needs using existing models of care.*

Recommendation 2

- *For individuals with challenging behaviors and support needs, the State should operate at least two acute crisis facilities (like the program at Fairview DC), and small transitional facilities.*
- *The State should develop a new “Senate Bill 962 like” model that would provide a higher level of behavioral services.*
- *Funding should be made available so that RCs can expand mobile crisis response teams, crisis hotlines, day programs, short-term crisis homes, new-model behavioral homes, and supported living services for those transitioning to their own homes.*

Plan for the Future of Developmental Centers in California

Recommendation 3

- *For individuals who have been involved in the criminal justice system, the State should continue to operate the Porterville DC Secure Treatment Program and the transitional program at Canyon Springs Community Facility.*
- *Alternatives to the Porterville DC Secure Treatment Program should also be explored.*

Recommendation 4

- *The development of a workable health resource center model should be explored, to address the complex health needs of DC residents who transition to community homes.*

Plan for the Future of Developmental Centers in California

Recommendation 5

- *The State should enter into public/private partnerships to provide integrated community services on existing State lands, where appropriate.*
- *Also, consideration should be given to repurposing existing buildings on DC property for developing service models identified in Recommendations 1 through 4.*

Recommendation 6

- *Another task force should be convened to address how to make the community system stronger*

Developmental Services (DS) Task Force

- In July 2014, the Secretary of CA Health and Human Services Agency reconvened the DC Task Force to form the Developmental Services (DS) Task Force
- Added five new members with expertise specific to community-based services
- Focus was to identify ways to strengthen services and supports in the community for individuals with developmental disabilities

DS Task Force

- Four distinct workgroups were created to examine
 - Service Provider Rates
 - RC Operations
 - Community Supports and Safety Net Services
 - Housing and Employment
- Draft report detailing the Task Force's work and recommendations can be found on the CA Health and Human Services Agency's website (www.chhs.ca.gov)

The developmental services 2017-18 budget trailer bill (AB 107) implements the Safety Net Plan by providing for the establishment of community services and supports, including crisis services and intensive transition services and supports, and reporting on the development and implementation of community services and supports...

Safety Net Plan

- Developed through input and guidance from DS Task Force and other stakeholders
 - ✓ Identified themes and priorities
 - ✓ Made recommendations
 - ✓ Broad representation from the community
- Provides a framework for the development of essential services and supports
- Focuses on access to resources for individuals whose significant support needs may result in community providers being unable to provide services
- Details how DDS will provide access to crisis services after the closure of a DC and how the state will maintain its role in providing residential services to those whom vendors cannot or will not serve

Safety Net Plan

- Does not rely on only newly developed resources
- It is not only for individuals who move from a DC
 - ✓ Services can be accessed by any regional center consumer
 - ✓ The plan (through AB 107) authorizes the use of CPP funds not needed to develop resources for individuals from a DC, to develop resources, including Safety Net resources for individuals living in the community
- Protective measures for individuals transitioning from PDC STP were established through AB 107
 - ✓ Protective of individual rights to dignity, freedom and choice
 - ✓ Tailored to the needs of the individual
 - ✓ Requires involvement from the regional center clients' rights advocate

Safety Net Plan

Acute Crisis

- Establish two state-operated mobile acute crisis teams
- Refurbish two existing homes at Fairview DC to relocate and expand capacity of Southern Stabilization, Training, Assistance and Reintegration (STAR) acute crisis services for 10 individuals
- Develop three homes in Northern CA to relocate and expand capacity of Northern STAR acute crisis services (currently at Sonoma) for 12 to 15 individuals

Safety Net Plan

Additional Components

- Develop 3 vendor-operated four-bed homes to provide step-down services for the Porterville DC Secure Treatment Program
- Develop intensive wrap-around services for individuals transitioning out of the Secure Treatment Program
- Develop intensive wrap-around services for persons with co-occurring developmental disabilities and mental health needs
- Develop 4 vendor-operated four-bed homes to provide step-down services for dual diagnosed individuals now served in Institutions for Mental Disease or other emergency facilities

California's developmental disabilities service system embraces a person-centered approach to planning with, and providing services and supports to, individuals with developmental disabilities...

Home and Community-Based Services New Rules

- In January 2014, the federal Centers for Medicare and Medicaid Services (CMS) issued final rules.
- Rules say that individuals must receive services in the most integrated settings of their choosing and also have full access to the benefits of community living
- Settings where individuals live and receive services must be about the nature and quality of individuals' experiences, rather than the type of buildings where the services are delivered

Home and Community-Based Services New Rules

- Intent is to ensure that states receiving federal Medicaid/Medi-Cal funds meet the needs of consumers who choose to get their long-term services and supports in their home or community, rather than in institutions
- DDS has been working with the CA Department of Health Care Services (DHCS), other state departments, and stakeholders on a Statewide Transition Plan for approval by CMS
- Deadline for compliance with the home and community-based settings criteria is March 2022

Self-Determination Program

- Will allow participants more control over selecting their services, supports and providers of services, within a specified budget
- During first three years, enrollment is limited to 2,500 individuals who will be randomly selected
- DDS is working with DHCS and CMS on approval of CA's Waiver application
- In September and October 2017, DDS is conducting SDP trainings for regional centers
- DDS is meeting with the Self Determination Workgroup on September 26th

Competitive Integrated Employment

- Full or part-time work for which an individual is paid minimum wage or greater in a setting with others who do not have disabilities
 - Paid Internship Program: Funding for consumers who choose to participate in an internship that will result in the acquisition of experience and skills for future paid employment, or for the internship itself to lead to full or part-time paid employment in the same job – up to \$10,400 per consumer per year
 - CIE Incentive Payments: Payments to service providers for placement and retention of consumers in CIE – providers receive \$1,000 after 30 consecutive days of CIE; \$1,250 for 6 consecutive months; and \$1,500 for 12 consecutive months

Service Provider Rate Study

- California's existing rate system is complex and has become more complex over time
- RCs coordinate the provision of more than 150 separate services to support the needs of individuals with developmental disabilities
- Recent changes to statute require DDS to provide a rate study to the Legislature by March 1, 2019
- DDS is contracting with a health care consulting firm to conduct a provider rate study that includes, but is not limited to
 - An assessment of the effectiveness of the methods used to pay each category of community service provider
 - An evaluation of the number and type of service codes for regional center services

California's developmental disabilities service system is aware of, and sensitive to, the lifestyle, cultural and linguistic backgrounds of the individuals we serve and is committed to reducing disparities in purchase of service expenditures and promoting equitable access to services and supports...

Purchase of Service Disparities

- Analyses of RC POS data consistently find that individuals with developmental disabilities from communities of color such as Latinos, African Americans and Asians receive less funding for RC services than do those who identify as White
- In 2016, \$11 million was allocated to DDS to assist RCs in the implementation of strategies to reduce disparities in regional centers' POS
 - In Fiscal Year 2017/18 DDS will also accept grant applications for projects to reduce disparities from Community-Based Organizations (CBOs)

Purchase of Service Disparities

- California statute requires RCs to collaborate annually with DDS to gather data related to each RC's Purchase of Service (POS) authorization, utilization and expenditures
- RCs must undertake certain activities to identify significant disparities and barriers to equitable access to services and supports, and to develop recommendations and plans to reduce existing disparities

Purchase of Service Disparities

- All 21 RCs submitted proposals to DDS requesting funding for projects aimed at reducing disparities
- DDS will be monitoring RC projects to determine effectiveness
- DDS is committed to learning more about challenges faced by individuals with developmental disabilities and their families in accessing services, and using available resources to make measurable progress in reducing disparities

Purchase of Service Disparities

- September 2017: DDS will identify measurable markers to track service levels along with specific improvement targets and target dates for achieving those markers
- October 2017: DDS will post proposed markers and targets to its website and seek input from a broad selection of stakeholders, including consumers, families and other members of the developmental disabilities community
- November 1, 2017: DDS will review stakeholder input and finalize markers and measures
- December 15, 2017: DDS will post markers and targets to its website

Community of Practice

- California is one of ten states accepted into Georgetown University's Community of Practice (CoP) on Cultural and Linguistic Competence in Developmental Disabilities
- Five year effort co-led by DDS and USC UCEDD.
- Partners for the CoP include UC Davis and UCLA UCEDDs, SCDD, DRC.
- Entities representing groups impacted by service disparities will also be invited to participate
- Transformation Leadership Team met in Washington D.C. on July 31st and August 1st

Priorities and Initiatives

- New Legislation and Funding - implementation
- Home and Community-Based Services Regulations
- Reducing Inequity/Disparities in Our System
- Self-Determination Program
- New Community Service Models
- Safety Net Plan
- Rate Study
- Competitive Integrated Employment
- Developmental Services Task Force

Priorities and Initiatives

ABX2 1 and SB 826 Funding

- ABX2 1 appropriated \$31 million for RCs to increase staff wages, salaries and benefits, and for administrative costs
- SB 826 appropriated \$17 million for RCs to hire additional service coordinator staff
- DDS surveyed RCs on the use of these funds in March 2017
- Another survey will be sent to RCs to obtain additional and updated information on the use of ABX2 1 funds
 - Are due to DDS by October 1, per statute



Questions?