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BUDGET SUBCOMMITTEE #1 ON  
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INSURANCE  
MILITARY AND VETERANS AFFAIRS

SELECT COMMITTEES  
CHAIR: INTELLECTUAL AND  
DEVELOPMENTAL DISABILITIES

March 17, 2021

Revised/Received  
06/11/2021

The Honorable Rudy Salas, Chair  
Joint Legislative Audit Committee  
1020 N Street, Room 107  
Sacramento, CA 95814

**SUBJECT: JLAC Request – Department of Developmental Services (DDS) & the 21 Regional Centers serving the intellectually & developmentally disabled (IDD) community in California**

Dear Chairman Salas and Members of the Committee,

I respectfully request that the Joint Legislative Audit Committee grant approval for a state audit to examine the Department of Developmental Services and the 21 regional centers that serve Californians with intellectual & developmental disabilities.

DDS is responsible for managing and overseeing the programs that serve approximately 350,000 individuals living with intellectual and developmental disabilities. In accordance with the Lanterman Act, DDS contracts with the 21 regional centers across California that act as the entry point into the system that serves these individuals and their families. Regional centers procure and fund a range of home and community-based services that assist individuals and their families in accessing care and developing individualized program plans (IPP's).

Through my work as Chair of the Assembly Select Committee on Intellectual and Developmental Disabilities, I have heard from Californians around the state about various shortcomings of DDS and the regional centers. To date, I have held nine Select Committee hearings across the state in San Diego, Coachella, Fresno, Concord, Eureka, Sacramento, Riverside and Redding. Additionally, I have made an online survey available on the Select Committee's website with the primary goal of assessing client and caregiver/ parent experiences with providers as well as regional centers.

So far, more than 600 consumers have completed the Select Committee's online survey in regards to their interactions with DDS and the regional centers with many requesting transparency, follow-up action, and I believe the audit is an appropriate next step.

Furthermore, there has been a recent increase in the number of concerning stories and investigative reports in the news around both treatment and services that patients and families have been experiencing that I think further necessitates both the need and urgency of an audit.

I respectfully ask that the audit's scope include, but not be limited to, the following activities:

1. Review and evaluate the laws, rules, and regulations significant to the audit objectives.
2. Examine DDS' oversight responsibilities of the regional centers and determine the extent to which DDS performs oversight at a selection of regional centers.
3. Determine whether DDS has established caseload ratios for regional centers to follow and identify whether it conducts reviews to ensure a selection of regional centers meet these ratios. In doing so, determine whether DDS performs the following:
  - a. Evaluates vacancy rates in case manager positions and the length of time these positions remain vacant.
  - b. Reviews case management data and determines whether regional centers' staffing is appropriate.
  - c. Reports to the Legislature on regional centers' compliance with established caseload ratios, including whether any staffing shortages exist and solutions to address such shortages.
4. Evaluate whether DDS provides training to regional centers and assess whether the training addresses steps the regional centers can take to ensure consumers receive quality services in a timely manner.
5. Determine whether DDS or a selection of regional centers perform any monitoring of vendors to ensure their services are adequate, cost effective, and meet applicable requirements. In doing so, determine whether DDS takes steps to promote the availability of services from vendors.
6. Identify whether DDS and a selection of regional centers provide information to consumers regarding how to file a complaint about services denied or dispute the nature, scope, or amount of services they receive. In doing so, determine whether the complaint or dispute process seems reasonable and appropriate.
7. Determine regional centers' oversight of the services it provides to consumers. In particular, for a selection of consumers' on Individual Performance Plans (IPP) at each of the selected regional centers, identify the following:
  - a. The extent to which consumers received services, and achieved the goals, specified in their IPPs. If the goals were not met, assess the steps taken by the regional center took to help the consumer achieve the goals.
  - b. The frequency with which regional centers followed-up with the consumer or the caseworker to determine whether consumers are receiving quality services and that their needs are being met.
  - c. To the extent possible, for a particular service specified in the IPP that is not available in the regional center's service area, whether the regional center or DDS took action to seek these services out and provide them to the consumer.

8. Identify the oversight responsibilities and key functions of regional centers' boards of directors, and determine whether any are duplicative of those performed by DDS. In particular, assess the following:

- a. Whether the regional centers' administrative costs are appropriate, including whether board of directors' salaries are reasonable.
- b. The extent to which board of directors' meeting minutes and agendas, including each directors' contact information, are available for public review on regional centers' websites.
- c. Whether policies and procedures exist requiring the board of directors to approve contracts in excess of specified thresholds and, based on a selection of contracts, whether these policies were followed.

9. Identify reasons why consumers don't receive or haven't been receiving services.

- a. Assess lack of existing services
- b. Reasons for "not offering a specific service"
- c. Other reasons for not getting services

10. Do regional centers collect data on and report on the following: Waiting times for services? Waiting times per regional center? Per service category?

11. What are the qualifications of direct service providers?

12. Is there appropriate/convenient access to Regional Centers in rural communities? To service providers?

13. How do DDS and regional centers educate parents and guardians about the services available to their children?

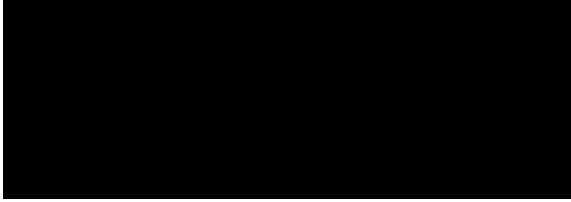
14. Does DDS track service provider organizations that are found to be negligent or in violation of law? Further, are consumers informed of this information?

15. Evaluate consistency across regional centers in the following areas:

- a. Timeliness of intake
  - b. Timeliness of service provision
  - c. Timeliness of response to consumer or family request for modification in services or providers.
  - d. Notification to DDS, other regional centers, and consumers, about actions taken against a vendor provider.
  - e. Provision of information to consumers regarding how to file a complaint about services denied, or dispute the nature, scope or amount of services received.
  - f. Public posting of the regional centers' board of directors meeting minutes and agendas pursuant to WIC 4629.5 (b) (7).
  - g. Regional Center compliance with WIC 4622 and WIC 4625.5.
- And evaluate how DDS has responded to those inconsistencies in instances when it was aware of them, including any training or technical assistance provided.

16. Review and assess any other issues that are significant to the audit.  
Thank you for your consideration of my audit request. If you have any questions, please do not hesitate to contact me or my staff at (916) 319-2011.

Sincerely,



**JIM FRAZIER**  
Assemblymember, 11<sup>th</sup> District