NOTICE TO ALL APPLICANTS: EQUITY FOR STUDENTS, EDUCATORS, AND OTHER PROGRAM BENEFICIARIES

Section 427 of the General Education Provisions Act (GEPA) (20 U.S.C. 1228a) applies to applicants for grant awards under this program.

ALL APPLICANTS FOR NEW GRANT AWARDS MUST INCLUDE THE FOLLOWING INFORMATION IN THEIR APPLICATIONS TO ADDRESS THIS PROVISION IN ORDER TO RECEIVE FUNDING UNDER THIS PROGRAM.

Please respond to the following requests for information:

1. Describe how your entity's existing mission, policies, or commitments ensure equitable access to, and equitable participation in, the proposed project or activity.

The commitment to service access and equity has been woven into the culture of the Department of Developmental Services (DDS). With input from the Developmental Services (DS) Task Force, which is comprised of stakeholders representing a wide range of perspectives of the system, DDS' Vision and Guidelines have been recently updated.

DDS Vision:

People with intellectual and developmental disabilities experience respect for their culture and language preferences, their choices, beliefs, values, needs, and goals, from a person-centered service system made up of a network of community agencies that provide high quality, outcome-based and equitable services.

Guiding Principles support the Vision, including, but not limited to the following:

<u>Service Equity:</u> All activities necessary to carry out the work of the developmental disability system must be free of implicit and overt bias towards any individual, including bias based on disability, financial status, and cultural, religious, gender, racial and ethnic identity. All policy decisions will be made with input from stakeholders of diverse backgrounds, representing the people impacted by the decision.

Emphasizing Prevention and Preventative Practices: Families of infants and toddlers with developmental delays must receive support to access the earliest possible interventions and preventive practices, so they have the best chance of establishing a life trajectory toward independence. This requires early identification, timely service availability and access to clinical experts in all applicable disciplines. Availability of strong support teams and stable relationships to minimize harm and eliminate crises must be a priority of service delivery.

The DDS Vision, Guiding Principles, and community input have inspired a number of policy initiatives that are either operational or in the process of implementation. In particular, DDS has expanded eligibility criteria to increase opportunities for individuals to access the service and supports of the system.

- Early Start (California's IDEA Part C Program) Eligibility: Statutory changes in 2022 lowering the eligibility threshold from 33 percent to 25 percent; separating communication delays into two distinct categories (expressive and/or receptive language); and identifying Fetal Alcohol Syndrome as a risk factor for developmental delays, to increase efforts to identify at-risk children.
- Early Start Child Find and Identification: Through its Regional Center Performance Measures initiative, DDS has also developed incentives for regional centers to enhance Early Start Child Find and Identification activities. The desired outcome of these measures is to more aggressively identify children who may be eligible for Early Start services and evaluate and enroll them in a timely manner, beginning with developing a Child Find Plan and reporting information on activities.

Further, DDS is increasing its public awareness activities and improving upon the information provided to family members and providing technical assistance to regional centers and service providers.

- Enhanced Service Coordinator Ratios: In 2022, DDS reduced regional center service coordinator ratios to 1:40 to provide families enhanced support and continuity during these critical stages of the child's life.
- Early Start Program brochures: DDS has developed Early Start program brochures in several formats and languages. The booklets are on topics such as "A Family Introduction to California Early Start for Infants and Toddlers with Disabilities and Their Families," "Reasons for Concern," and "Parents Rights: An Early Start Guide for Families." The brochures are available in English, Spanish, Arabic, Hmong, Korean, Russian, Tagalog, Vietnamese, and Chinese, online and in hard copy.
- Early Childhood Information Packet: DDS is preparing to release an updated information packet to provide an overview of the regional center system for any person seeking regional center services under the California Early Intervention Services Act. It will serve as a resource guide for consumers and their families with information on consumer rights and contact information for responsible parties within the California developmental services system. The packets will be available in multiple languages.
- Early Start Videos: DDS produced the animated video entitled *The Story of Max* as a guide to the Early Start system through the lens of a family. It places the viewer in the shoes of parents who are concerned about their child's development and follows them from referral to IFSP development and start of services. DDS is developing additional videos, including an educational video on transitioning out of Early Start services, and on navigating services for Deaf and Hard of Hearing (DHH) families. All videos will be available in Spanish, Vietnamese, American sign language and Lengua de Senas Mexicana (Spanish sign language).
- Comprehensive System of Personnel Development (CSPD): As part of the CSPD, the
 Early Start Foundations Institute (ESFI), DDS offers training and technical assistance to
 Early Start service coordinators, supervisors, managers, local educational agencies, service
 providers, and family resource center staff. The trainings explore ways of adjusting current

practices to work effectively with communities who have traditionally limited referrals to Part C early intervention services, including families who are homeless, families living in poverty, foster families, and Native American families. The training and technical assistance recipients work with local partners to discuss and explore the realities and strategies for implementing Individual Family Service Plans in specific communities, including providing services to traditionally underserved groups, including families living in poverty, homeless, Native American, or foster families.

While eligibility for services is being expanded and local supports are being increased, DDS continues to engage stakeholders with lived experience to identify more opportunities to improve upon access and participation.

- Interagency Coordinating Council (ICC): DDS works with ICC to identify opportunities for outreach and child find through collaboration with other state and local agencies that serve foster care children, low-income families, victims of domestic violence, and homeless populations. With American Rescue Plan Act funding for Part C, DDS is recruiting community representatives to increase the ICC's capacity and diversify its community participation at the state level. The funding will support outreach activities, recruitment, training and incentivize parents to participate.
- Family Outcome Surveys: DDS continues to implement strategies to increase communication with stakeholders to measure and improve program outcomes through the Family Outcome Survey. These surveys are sent out annually to families representing a wide range of ethnicities within California to ensure culturally and linguistically diverse family feedback is captured. DDS uses the Early Childhood Technical Assistance (ECTA) Center's Response Rate and Representativeness Calculator to determine if the surveys received are representative of the demographics of infants and toddlers enrolled in the Part C program, and course-correct accordingly. To increase the opportunity for families from culturally and linguistically diverse backgrounds to participate, DDS has made the survey available in English, Chinese, Farsi, Hmong, Korean, Spanish, Tagalog, and Vietnamese.

DDS has used a multi-faceted approach to address access and equity and has obtained valuable information to apply going forward. This effort is not an "event"- it's an ongoing quest for progress. To underscore its commitment to continued growth and development, DDS is developing a **Strategic Plan** that will further the goal of reducing inequities.

2. Based on your proposed project or activity, what barriers may impede equitable access and participation of students, educators, or other beneficiaries?

DDS continues to develop outreach and data systems to better understand the influences of age, geography, population density, culture, and language preferences as thoroughly as possible to further develop outreach activities, improve upon family experiences with intake procedures and orientation to the system, and accessing services.

In some communities, trust must be developed before individuals and families are willing to engage with the system, feel free to give input, or challenge the system. The state and regional centers will continue working to build relationships within their stakeholder communities and cultivate opportunities for honest discussions among them. Many of the initiatives that have been highlighted are in early stages of implementation. Further development of these important system

improvements will assist in identifying if and where additional gaps in the delivery of services are present.

Further, California, like other states is addressing the challenges arising from shortage of qualified personnel. DDS and the regional centers are working together to implement initiatives targeted at recruiting graduate students from diverse communities to pursue internships with contracted provider agencies.

3. Based on the barriers identified, what steps will you take to address such barriers to equitable access and participation in the proposed project or activity?

DDS has launched numerous initiatives to address service access and equity for its culturally diverse population, including but not limited to the following:

• Service Access and Equity Grants: For several years DDS has been administering an annual grant program to fund targeted efforts to increase service access and equity for the developmental services system. Community-based organizations and regional center participation in the grant program has increased and touched countless individuals and families. Upon demonstrating effectiveness, some projects have led to systemwide policy changes such as enhanced service coordination for underserved individuals.

Outreach, education and family experiences with intake procedures

- **ES Tribal Engagement:** DDS has been actively engaged with leaders of tribal communities to improve outreach and education for Native American families to increase access and utilization of Early Start services.
- Language and Cultural Competency: DDS is promoting language access and cultural
 competency across the regional center system, through orientations, specialized group and
 family information sessions, culturally sensitive outreach efforts, and translation services.
- Early Start Assessment Tools: DDS is working with community partners to identify and implement assessment tools and regional center processes to determine Early Start eligibility, with particular attention to children in foster care or when English is not the family's primary language.
- Implicit Bias Training: Training to understanding and address implicit bias is being provided to regional center personnel, including contracted staff involved in intake, assessment and eligibility determinations.
- Community Navigator Program: DDS has established a community navigator program through family resource centers to help families connect with services.
- Standardized Intake Process: In collaboration with the Association of Regional Center Agencies (ARCA), DDS is developing a standardized intake process to be implemented statewide. Among its many benefits, a standardized intake process would facilitate ease of accessing the program for migrant families.

Partnerships to Train Professionals in Public Assistance Programs: DDS will pilot a
program to strengthen partnerships between regional centers and organizations critical to
identifying and locating eligible children such as county public assistance programs and
community-based organizations (CBOs). The pilot program would provide training to
professionals on statutory and regulatory requirements related to Early Start, how to
recognize young children at risk quickly, and to connect them to regional centers.

Developing regional center and service provider cultural competency

- Deaf Access Specialists: A new Deaf Access Specialist in the Part C lead agency is
 providing statewide leadership and subject matter expertise on the provision of services and
 supports for individuals who are deaf and have intellectual or developmental disabilities.
 Deaf Access Specialists are being hired at all 21 regional centers to support local partnerships
 and development of services and supports for the deaf community.
- Cultural Specialists: Cultural Specialists have been hired at all 21 regional centers to implement recommendations and plans to reduce disparities in the provision of services to underserved populations to make the services provided at the local level more responsive to the needs of individuals from diverse communities.
- Culturally and Linguistically Sensitive Provider Trainings: DDS is providing reimbursement for funding early intervention service providers to attend approved trainings that prioritize culturally and linguistically sensitive services.

Increasing service access through increased participation of diverse service providers

- Targeted Recruitment of Early Start Professionals: A pilot program to recruit and train 200 interns and place them with agencies that provide critical early intervention services to increase the availability of service providers that are representative of the culturally and linguistically diverse families and children served.
- **DSP Bilingual Differential:** DDS is providing a pay differential to direct support professionals (DSP) or qualified personnel who provides services to the families and can communicate in a language or medium other than English.

In addition to the initiatives described above, DDS is modernizing its data collection infrastructure to allow for more reliable and timely data analysis, sharing and reporting. This is needed to monitor for improvement and achievement of systemwide and individual outcomes relative to service access and equity, as well as improving the family experience and access to information about their services.

4. What is your timeline, including targeted milestones, for addressing these identified barriers?

All the initiatives described above have either been launched, are underway or are in early stages of development and pending stakeholder input for program specifications. Among them, there are some key milestones to highlight:

- Develop a Strategic Plan that includes Service Access and Equity in the developmental service system by 2024.
- Full implementation of initiatives supported by ARPA for Part C is anticipated no later than September 2023. This includes but is not limited to recruitment of Early Start professionals, culturally and linguistically sensitive provider trainings, and partnering to train professionals in public assistance programs.
- An evaluation of the Service Access and Equity Grant Program has been conducted by Georgetown University to review the effectiveness of the program as administered thus far. DDS anticipates the final report and recommendations by July 2023.
- The modernization of information technology systems is a multi-year project currently underway and includes substantial stakeholder input throughout procurement and development of the technology solutions. Rollout is anticipated in 2025.

Notes:

- 1. Applicants are not required to have mission statements or policies that align with equity in order to submit an application.
- 2. Applicants may identify any barriers that may impede equitable access and participation in the proposed project or activity, including, but not limited to, barriers based on economic disadvantage, gender, race, ethnicity, color, national origin, disability, age, language, migrant status, rural status, homeless status or housing insecurity, pregnancy, parenting, or caregiving status, and sexual orientation.
- **3.** Applicants may have already included some or all of this required information in the narrative sections of their applications or their State Plans. In responding to this requirement, for each question, applicants may provide a cross-reference to the section(s) and page number(s) in their applications or State Plans that includes the information responsive to that question on this form or may restate that information on this form.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1894-0005. Public reporting burden for this collection of information is estimated to average 3 hours per response, including time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain a benefit. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this individual collection, send your comments to ICDocketMgr@ed.gov and reference OMB Control Number 1894-0005. All other comments or concerns regarding the status of your individual form may be addressed to either (a) the person listed in the FOR FURTHER INFORMATION CONTACT section in the competition Notice Inviting Applications, or (b) your assigned program officer.