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8 UNITED STATES DISTRICT COURT  
9 CENTRAL DISTRICT OF CALIFORNIA  
10 WESTERN DIVISION  
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12 **KATIE A., et al.,**

13 Plaintiffs,

14 v.

15 **DIANA BONTA, et al.,**

16 Defendants.  
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Case No. CV-02-05662 AHM (SHx)

**SPECIAL MASTER'S REPORT ON  
PROGRESS TOWARD  
COMPLETION OF THE KATIE A.  
IMPLEMENTATION PLAN**

Judge: Honorable A. Howard Matz  
Crtrm: 14

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1.  
2. **PART ONE**

3. **INTRODUCTION**

4. This report is submitted to the Court in accordance with the Katie A. Court's Orders  
5. dated December 1, 2011, SETTLEMENT AGREEMENT. Subsequent orders issued by the  
6. Court on July 17, 2012 and July 23, 2012, further clarified expectations regarding the Special  
7. Master's evaluation of the Implementation Plan. As a result of these orders, the Special  
8. Master's evaluation was divided into two phases. Phase One of the Implementation Plan will  
9. be reviewed on September 14, 2012; Phase Two will be reviewed on December 13, 2012.

10. It is my pleasure to report that on August 24, 2012, the parties have reached agreement on  
11. a Proposed Implementation Plan (hereinafter referred to as Implementation Plan). The  
12. Implementation Plan is divided into two Phases. Phase One activities and deliverables are to  
13. be completed within the 2012 calendar year and Phase Two reflects activities that may or may  
14. not begin in 2012 but will extend into 2013 and beyond. As specified in the Court's July 23,  
15. 2012 Order, Phase Two shall describe the 'framework and expectations, the anticipated  
16. timelines' and 'any discussion about Phase Two will be meant to assure an understanding of  
17. what will be necessary to complete an Implementation Plan for Phase Two by December 13,  
18. 2012.' Since the Special Master's report does not need to contain the final or completed

19. Phase Two Implementation Plan, the Special Master's evaluation will be primarily focused on  
20. Phase One of the Implementation Plan.

21. The Proposed Katie A. Implementation Plan, Exhibit 1, reflects the consensus of the  
22. Parties, including the Negotiation Workgroup. The Special Master's evaluation of the Katie  
23. A. Implementation Plan and its recommendations are those of the Special Master only, and  
24. does not necessarily represent the views of the various parties and partners involved in  
25. developing the Katie A. Implementation Plan, who may provide the Court with their own  
26. written responses to this report.

27. The Implementation Plan has been developed through an intense and collaborative effort.  
28. Since January 2012, the Negotiation Workgroup has been engaged in a process that supports  
29. the development of the Implementation Plan, including meeting as an entire group on a  
30. weekly basis and leading various workgroups, completing specific tasks and facilitating the  
31. development of the subgroup charters to help guide further development of the

1 implementation plan.

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3 ***The Purpose Of This Report***

4 This report's has two purposes: (1) to inform the Court regarding Phase One of the  
5 Katie A. Implementation Plan and to make recommendations consistent with Paragraph  
6 25(b) of the Settlement Agreement, 'the Special Master shall determine whether the  
7 Implementation Plan is reasonably calculated to ensure that State Defendants meet the  
8 terms of the Agreement and objectives set forth in Paragraph 19', and (2) consistent with  
9 the Court's Order Dated, July 23, 2012, to describe what is contemplated in Phase Two  
10 of the Implementation Plan - 'the framework and expectations and anticipated timelines,  
11 etc.' that assures 'an understanding of what will be necessary to complete an  
12 Implementation Plan for Phase Two by December 13, 2012'.

13 ***Katie A. Negotiation Workgroup Composition***

14 The Negotiation Workgroup composition has not changed since my last progress  
15 report in April 2012. (A complete list of participant names and titles is included in  
16 Exhibit 2 at the end of this Report.)

17 The Negotiation Workgroup includes representatives of the California Department  
18 of Health Care Services (CDHCS); California Department of Social Services (CDSS);  
19 the Department of State Hospitals, formerly the Department of Mental Health; the  
20 California Department of Justice, Office of the Attorney General; representatives of the  
21 class and class perspective including counsel, parents, families, and provider  
22 organizations (the youth representative position is currently vacant); the County Welfare  
23 Directors Association of California; the California Mental Health Directors Association;  
24 and the County of Los Angeles.

25 ***Organization of this Document***

26 The remainder of this report to the Court is divided into the following parts: *Part Two*  
27 presents the Special Master's evaluation of the Katie A. Implementation Plan, Phase One as  
28 required in the AGREEMENT paragraph 25(b) and the Court's Orders dated July 23, 2012 and  
29 Phase Two as required by the Court's Orders dated, July 23, 2012; a brief overview at the end of  
30 *Part Two* summarizes the Special Master's Findings for Phase One and Special Master's Review

1 and Comments on Phase Two.

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## PART TWO

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### SPECIAL MASTER'S EVALUATION OF THE IMPLEMENTATION PLAN PHASE

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#### ONE AND REVIEW AND COMMENTS PHASE TWO

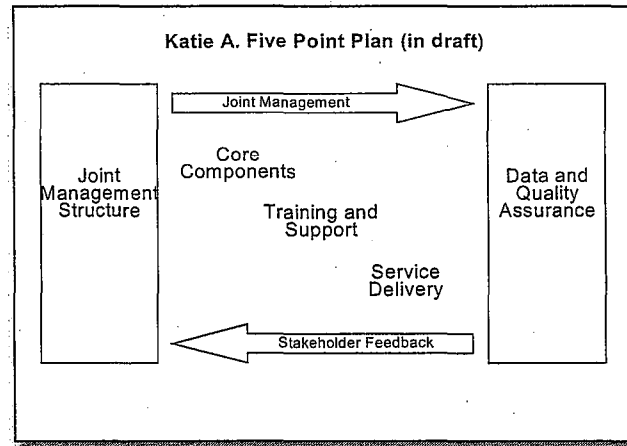
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DATED AUGUST 28, 2012

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8 This section of the report to the Court presents the Special Master's evaluation  
9 and recommendations regarding the Katie A. Implementation Plan. The Special  
10 Master, in order to ensure the Court receives a comprehensive evaluation of the  
11 Implementation Plan, will identify not only the areas of agreement but also concerns  
12 identified by the Negotiation Workgroup regarding the two phase approach to the  
13 Implementation Plan.

14 The challenge with designing and implementing a plan as comprehensive and far-  
15 reaching as the Katie A. Settlement Agreement is to frame the various objectives and  
16 activities of the strategy into a holistic approach that does not split apart into  
17 disconnected activities as different groups work independently to solve the many  
18 problems associated with preparing the state and counties for full implementation of  
19 the plan. The Implementation Plan has been divided into six objectives: Core  
20 Components, Family and Youth Involvement, Service Delivery and Rollout, Training  
21 and Technical Assistance, Data and Quality Assurance and Joint Management  
22 Structure. The six objectives continue to fit into the Katie A. Five Point Plan structure  
23 as presented to the Court in previous reports. The addition of the Family and Youth  
24 Involvement Objective connects to all five points of the Plan. The goal is to have a  
25 holistic and comprehensive system of individualized services that is capable of  
26 addressing the complex and interrelated needs and strengths of children and youth in  
27 the Katie A. class and their families. In the interest of keeping the integrity and  
28 connectedness of this Settlement Agreement at the forefront of the many  
29 implementation planning activities and tasks currently underway and identified in the  
30 Implementation Plan, the Special Master has developed the following diagram:



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4 The diagram illustrates that the CDHCS and CDSS Joint Management Team would  
 5 oversee the broad Katie A. effort. And – within the context of the larger statewide effort – the  
 6 58 local county Joint Management Teams would manage the Core Practice Model and  
 7 intensive mental health services through the utilization of manuals, training and support, and  
 8 service delivery. Local and state quality assurance and accountability efforts would provide  
 9 transparent stakeholder feedback to the state and county Joint Management Teams to learn  
 10 from and improve on implementation activities and ensure that members of the Katie A. class  
 11 and their families are benefiting from services as intended in the Settlement Agreement.

12 The Implementation Plan includes an introduction and six objectives that outline short  
 13 and long-term implementation activities, timelines and responsible parties organized in two  
 14 phases: Phase One covers a period for activities that are in progress or in development and  
 15 slated for completion within the 2012 calendar year; Phase Two reflects activities that may or  
 16 may not begin in 2012 but will extend into the year 2013 and beyond. The purpose and  
 17 anticipated results taken from the Settlement Agreement are included to provide additional  
 18 context taken from the settlement agreement. Accomplishments to date are summarized in an  
 19 addendum to reflect the intensive efforts that have been invested in navigating and completing  
 20 work that is related to implementation. The Special Master's evaluation begins below with  
 21 the Introduction to the Implementation Plan and then proceeds to review each of the six  
 22 objectives: Core Components, Family and Youth Involvement, Service Delivery and Rollout,  
 23 Training and Technical Assistance, Data and Quality Assurance and Joint Management  
 24 Structure.

1 As currently structured, the Implementation Plan is organized by the six objectives listed  
2 above. Additionally, the term 'objective' is also used throughout the Implementation Plan to  
3 identify specific indicators for each of the six objectives. For the purpose of clarity and  
4 consistency, the remainder of the Special Master's Report will use the term 'sections' to refer  
5 to the six 'objectives' used in the Implementation Plan so as not to be confused with the  
6 Settlement Agreement, Paragraph 19 objectives (a-d) used by the Special Master in his  
7 evaluation of the Implementation Plan. In addition, under each of these 'sections' of the  
8 Implementation Plan the term 'objectives' will be referred to as 'goals'.

9 As indicated above, the intent is for the Implementation Plan to be holistic and  
10 comprehensive, but for the purposes of this report the Special Master will be evaluating each  
11 of the Implementation Plan's six sections individually to determine "whether, Phase One of  
12 the Implementation Plan is reasonably calculated to ensure that State Defendants meets the  
13 terms of the Agreement and objectives set forth in Paragraph 19 of the Settlement  
14 Agreement". I expect a number of the Implementation Plan Sections will not in themselves  
15 be sufficient to meet the full set of expectations set forth in the Settlement Agreement  
16 Objectives, Paragraph 19(a-d) or the Agreement Terms, specifically Paragraph 20 (a-m). The  
17 Special Master will, upon completing his evaluation of all six sections of the Implementation  
18 Plan, provide Implementation Plan Findings for Phase One, and Special Master's Review and  
19 Comments on Phase Two.

## 20 21 Introduction

22 Overall, the introduction has established the primary purposes of the Implementation  
23 Plan. It outlines how the Implementation Plan is organized, which includes a two phase  
24 approach. Phase One and Phase Two of the Implementation Plan have identified timeframes  
25 and activities, with goals and anticipated results. There is a recognition that the  
26 Implementation Plan is a road map, and is a work in progress that will evolve over time.

27 The Implementation Plan acknowledges the important role the Negotiation Workgroup  
28 has performed and will continue to perform in assisting and guiding the Parties. The Special  
29 Master would add, in his evaluation of the introduction, a commendation to the members of  
30 Negotiation Workgroup for their expertise and commitment to the Katie A. Interest Based  
31 Decision Making Process.



1 The introduction to the Implementation Plan is sufficient in that it provides a high level  
2 overview, sets the tone, establishes priorities and provides direction with one exception. It  
3 would have been valuable, on page 1, paragraphs 3 and 4, of the Introduction, to identify the  
4 'remaining Settlement Agreement requirements', specifically those found in Section III,  
5 Service Delivery Roll Out, Section V, Data and Quality Assurance and Section VI, Joint  
6 Management Structure of the Implementation Plan. The Special Master understands  
7 additional work is currently underway in consultation with the Negotiation Workgroup on  
8 these and other sections of the Implementation Plan, some of which will be addressed to the  
9 Court that will further detail implementation activities, strategies and deliverables. Evaluation  
10 of Phase Two of the Implementation Plan will occur at the December 13, 2012 hearing.

11 The Special Master sees a critical role for sections V and VI in ensuring the overall long  
12 term success of the Agreement, expressed in Paragraph 19, objectives (a-d) and Paragraph 20,  
13 (a-m) which could have been highlighted in the introduction section. The experiences,  
14 challenges and successes of the County of Los Angeles' implementation of its Katie A.  
15 settlement and the early lessons learned from the CDSS implementation of its California  
16 Partners in Permanency (CAPP) initiative underscore the importance of these two sections.  
17 The Special Master will discuss sections V and VI later in his report.

## 18 **The Pathways to Mental Health Services Objectives**

### 19 **Section 1. Core Components**

#### 20 **Part A. Core Component Elements**

21 Core Component Elements, Phase One, Part A, of the Implementation Plan identifies  
22 goals, the activities, deliverables, and timelines to ensure: the production and statewide  
23 dissemination of a Medi-Cal Documentation Manual for ICC and IHBS; basic orientation  
24 training is provided to counties, providers and stakeholders on the Documentation Manual;  
25 technical assistance is provided on the Documentation Manual; sufficient progress in made on  
26 completing the Core Practice Manual (CPM) Guide for early calendar year 2013 distribution.

27 Phase Two, which will not be evaluated at this time, reflects activities and timelines  
28 intended to: finalize and disseminate the Core Practice Model (CPM) Guide; release basic  
29 orientation and training on the CPM Guide; identify the TFC model/services, Medi-Cal  
30 coverage, and add or update billing rules to the Medi-Cal Documentation Manual that may or  
31 may not begin in 2012 but will extend into 2013 and beyond.



1 Special Master's Evaluation –Core Components Element, Part A, Phase One

2 Core Components, Part A, Phase One includes the Implementation plan, the activities,  
3 deliverables and timelines that ensure the Documentation Manual for ICC and IHBS is  
4 developed and distributed statewide and the necessary steps have been taken to enable  
5 counties to deliver ICC and IHBS services no later than the end of this calendar year.

6 The Special Master has determined the implementation activities, deliverables, and  
7 timelines described in Section I, Part A, Phase One of the Implementation Plan have the  
8 sufficient steps and correct timeframes identified that, when accomplished, will have  
9 satisfied the following Terms and Objectives of the Settlement Agreement:

10 Paragraph 20

- 11 • *(a)(1) (develop and disseminate Documentation Manual) (Page 6-7);*
- 12 • *(b)(1-3)(Documentation consistent with Core Practice Model)(Documentation*  
13 *Manual developed in collaborative stakeholder process)(post draft of Documentation*  
14 *Manual for public comment) (Page 7-8), and*

15 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

16 Paragraph 19

- 17 • *(a)(facilitate the provision . . . array of services . . . delivered in a coordinated*  
18 *fashion . . .into a coherent and all inclusive approach) (Page 5);*
- 19 • *(d)(address need for certain class members . . . more intensive needs . . . subclass to*  
20 *receive . . . mental health services in . . . own home . . .appropriate to their needs . . .*  
21 *facilitate reunification . . . safety, permanence and well-being) (Page 5);*

22 Paragraph 20

- 23 • *(g)(1) (guidance on state and federal laws . . . to implement this Agreement . . .*  
24 *provide ongoing technical assistance to include manuals, policy-guidance, education*  
25 *and training, program development . . . fidelity . . . to principles . . . CPM) (Page 11).*

26 Part A, Phase One, also identifies the activities that are underway and intended to produce  
27 a CPM Guide ready for statewide distribution in early calendar year 2013. The Special Master  
28 has determined the activities and timelines described in Section I, Part A. Phase One, to  
29 'Develop a CPM Guide' have the sufficient steps and correct timeframes identified that, when

1 accomplished, will have  
2 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

3 Paragraph 19

- 4 • *(a)(facilitate the provision . . . array of services . . . delivered in a coordinated . . .*  
5 *fashion . . . into a coherent and all inclusive approach) (Page 5);*

6 Paragraph 20

- 7 • *(d)(CDMH and CDSS . . . consultation Negotiation Workgroup . . . develop . . . Core*  
8 *Practice Model Guide (Page 9);*  
9 • *(g)(1) (provide ongoing technical assistance to include manuals, policy-guidance,*  
10 *education and training, program development ... fidelity . . . to principles . . . CPM)*  
11 *(Page 11).*  
12

13 Special Master's Review and Comments – Core Component Elements, Part A, Phase Two

14 Core Components, Part A of the Implementation Plan, Phase Two, will not be evaluated  
15 at this time. The Special Master will review and provide comments on Phase Two of the  
16 Implementation Plan to ensure there is a framework, expectations and the anticipated  
17 timelines described in Phase Two that indicate what will be necessary to complete an  
18 Implementation Plan for Phase Two by December 13, 2012.

19 Phase Two of the Implementation Plan shares the same goals and anticipated results as  
20 Phase One, but has an implementation timeframe of 2013 and beyond, as well as a different  
21 set of activities and timelines intended to ensure: Core Practice Model CPM Guide is finalized  
22 and disseminated; basic orientation training is provided on the CPM Guide; TFC  
23 model/services and Medi-Cal coverage are identified; Medi-Cal billing rules are added or  
24 updated in the Documentation Manual.

25 The Goals and Anticipated Results for Part A, Phases One and Two provide an excellent  
26 framework and set the correct expectations for Part A of the Implementation Plan. Activities  
27 and timelines are identified and appear reasonable for producing and disseminating the CPM  
28 Guide. The activities for TFC appear well thought out and adequately describe what needs to  
29 be done to identify and determine the TFC services/model, Medi-Cal coverage and update the  
30 billing guide. The timelines have yet to be determined. The Special Master recognizes and  
31 appreciates the full set of issues that need to be addressed in this matter. Perhaps at the

1 December 13, 2012 Court hearing these timelines can be further defined.

2 Section 1. Core Components

3 Part B. Core Practice Model Adoption

4 Section 1, Core Components of the Implementation Plan Part B, Phase One, Core  
5 Practice Model Adoption identifies goals, the activities, deliverables, timelines and the  
6 anticipated results that are intended to: finalize CPM Guide; establish and charter the CPM  
7 Fiscal Task Force (the CPM Fiscal Task Force Charter can be found in Exhibit 3, at the end of  
8 this report); establish and charter the Joint Management Task Force (the Joint Management  
9 Fiscal Task Force Charter can be found in Exhibit 4, at the end of this report).

10 Special Master's Evaluation –Core Components, Part B, Core Practice Model Adoption Phase One

11 Core Components, Part B, Core Practice Model Adoption, Phase One, of the Implementation Plan  
12 identifies the activities, deliverables, and timelines to ensure: the CPM Guide will be finalized; a Core  
13 Practice Model Taskforce is chartered and established; a Joint Management Taskforce (JMT) is  
14 chartered and established.

15 The Special Master has determined the implementation activities, deliverables, and timelines  
16 described in Section I, Part B, Phase One, have the sufficient steps and correct timeframes identified  
17 that, when accomplished, will have

18 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

19 Paragraph 19

- 20 • (a)(Services delivered in a coordinated, comprehensive . . . all-inclusive approach)  
21 (Page 5);  
22 • (b)(Structure . . . supports core practices . . . described in (a) above) (Page 5);

23 Paragraph 20

- 24 • (b)(1-3)(Manual consistent . . . Core Practice Model . . . developed . . . collaborative .  
25 . . public comment) (Page 6-7);  
26 • (d)(CDMH and CDSS . . . established shared management structure . . . develop core  
27 practice guide) (Page 9);

- 1 • (e)(consultation with joint management taskforce . . . develop . . . training . . . quality  
2 control) (Page 10);
- 3 • (m)(1-3)(CPM Fiscal Task Force . . . State . . . Negotiation Workgroup . . . strategic  
4 plan . . . delivery services within core practice model) (Page 15-16).

5 Special Master's Review and Comments – Core Practice Model Adoption, Part B, Phase Two

6 Core Components, Part B, Phase Two of the Implementation Plan will not be evaluated at this  
7 time. The Special Master will review and provide comments on Phase Two of the Implementation  
8 Plan to ensure there is a framework, expectations and the anticipated timelines described in Phase  
9 Two that indicate what will be necessary to complete an Implementation Plan for Phase Two by  
10 December 13, 2012.

11 Core Components, Part B, Core Practice Model Adoption, Phase Two share the same goals  
12 and anticipated results as Phase One but have an implementation timeframe of 2013 and beyond as  
13 well as different set of activities intended to ensure: basic orientation and adoption strategies for  
14 the CPM guide; notice to counties that describe ICC and IHBS within a CPM approach; that TFC  
15 is included in CPM Guide; that the CPM Fiscal Taskforce develops a strategic plan and  
16 incorporates it into the Implementation Plan; that CDHCS and CDSS consult with the JMT to  
17 develop training, practice tools, protocols and quality review systems.

18 The Goals and Anticipated Results for Part B, Phases One and Two provide an excellent  
19 framework and set the correct expectations for the Implementation Plan. Activities, deliverables  
20 and timelines are identified and appear reasonable for providing training and developing initial  
21 adoption strategies for the CPM Guide and noticing counties. TFC activity is well described but  
22 the timeline needs to be determined. As suggested in Part A, TFC timelines should be further  
23 clarified in the December 13, 2012 report to the Court. Activities and timelines around decision  
24 making and deliverables for the CPM Fiscal Taskforce and JMT need to be elaborated on and  
25 described in more detail. It's not clearly described how these two Taskforces products will get  
26 developed and decisions will be made. It will be important to add this additional detail into the  
27 Phase Two plan presented at the December 13, 2012 hearing.

28

29 Special Master Summary Evaluation - Core Components, Part A & B Phase One

1 The Special Master will now provide an evaluation of the sufficiency of Section 1, Part A and  
2 B, Phase One of the Implementation Plan. As identified and described in an earlier part of the  
3 Special Master Report, it was anticipated that no one section of the Implementation Plan would in  
4 itself have the sufficiency to fully satisfy the requirements set forth in the Settlement Agreement.  
5 I'm pleased to determine that Section 1, Part A and B activities and deliverables, specifically the  
6 development and distribution of the Medi-Cal Documentation Manual and the development of  
7 CPM Manual, have sufficiently responded or met key terms of the Settlement Agreement. All  
8 parties should be commended for this effort.

9 The Special Master notes for the Court, that Core Component Part A and B, goals, activities,  
10 deliverables, timelines and anticipated results do not ensure the Sub-Class Members will receive  
11 the medically necessary, all inclusive and coordinated services as identified in Paragraph 19(a) and  
12 Paragraph 20 (i) and (l) of the agreement. It does not ensure Katie A. Class members will receive  
13 services consistent with the CPM guide. The Special Master anticipates this area of concern will  
14 be addressed in future sections of the Implementation Plan.

15 Special Master's has two general comments and suggestions that pertain to all six Sections of  
16 the Implementation Plan. Suggestion one, in the future it would be helpful, perhaps on a Gantt  
17 Chart, if the state would identify what state department, division or branch and the individuals  
18 and/or team is responsible for the various task, activities and responsibilities identified in the  
19 Implementation Plan. Perhaps at the December 13, 2012 Court hearing such a chart/work plan  
20 might be available. Suggestion two, perhaps at the December 13, 2012 Court hearing additional  
21 information on resources, or potential resources will have been identified and can be shared with  
22 the Court. The Special Master does not question the State's commitment to implement the Katie  
23 A. Settlement through the Implementation Plan under the Court's review on September 14 and  
24 December 13, 2012, but a question undoubtedly will be asked regarding the identification of the  
25 necessary resources to accomplish the activities, tools and deliverables identified in the  
26 Implementation Plan.

27 Special Master Summary Review and Comments - Core Components, Part A & B Phase Two

28 Core Components, Part A and B, Phase Two of the Implementation Plan will not be  
29 evaluated at this time. The Special Master will review and provide comments on Part A and B,  
30 Phase Two of the Implementation Plan to ensure there is the framework, expectations and the  
31 anticipated timelines described in Phase Two indicating what will be necessary to complete an



1 Implementation Plan for Phase Two by December 13, 2012.

2 Overall, Phase Two, Core Components, Part A & B has established a sound framework and  
3 the correct expectations for Part A and B of the Implementation Plan. It should provide the  
4 necessary direction to develop the additional activities for Phase Two of the Implementation  
5 Plan, however many of the activities are too general and do not describe how the deliverables  
6 will occur and, in some cases, the steps or processes to arrive at a decision are not well defined.  
7 This was most noticeable with the JMT and CPM Fiscal Taskforces. Timelines for TFC have  
8 been discussed earlier and will not be repeated now.

9 The Negotiation Workgroup did reach consensus on the Implementation Plan. There were  
10 concerns from numerous members of Negotiation Workgroup regarding the possible unintended  
11 consequences of adopting a two phase approach. The possible unintended consequences  
12 identified by some members of the Negotiation Workgroup are: that if ICC and IHBS is 'on the  
13 ground' before everything else is in place there will be little incentive by counties and providers  
14 to participate, adopt or support the implementation of the other sections of Implementation Plan,  
15 especially the adoption of the core practice approach (The CPM Model); the other sections,  
16 which in the long run may have more transformative potential and effect on the overall system,  
17 may be more difficult to implement; just doing more of the same, providing service and  
18 conducting business as usual, could provide little motivation to engage with the other sections of  
19 the Implementation Plan. All members of the Negotiation Workgroup, including those most  
20 concerned, recognize that there is a Settlement Agreement in place, with specific terms and  
21 objectives that must be addressed, some within a shorter time frame than others. In spite of these  
22 concerns, the Negotiation Workgroup remains energized and committed to get the  
23 Implementation Plan launched and 'not let the perfect be the enemy of the good'. The State  
24 Team and key stakeholders, continue to focus on how to implement all sections of the  
25 Implementation Plan as quickly and successfully as possible to address head on the 'unintended  
26 consequence' concerns that may arise and to ensure the overall success of the Katie A.  
27 Agreement.

28 Section II. Family and Youth Involvement

29 The Family and Youth Involvement Section II, Phase One of the Implementation Plan  
30 identifies goals, the activities, deliverables and anticipated results intended to: engage and  
31 support youth in joining the Katie Negotiation Workgroup; develop funding sources to



1 continue to support family and youth participation and input in the design.

2 The Special Master has determined the implementation activities, deliverables and  
3 timelines described in Section II, Phase One are aimed in the right direction. The goals and  
4 anticipated results form a clear pathway, identified activities are intended to address the goals  
5 and anticipated results of this section. There are sufficient steps and correct timeframes  
6 identified that, when accomplished, will have

7 satisfied, in part, the following Terms of the Settlement Agreement:

8 Paragraph 20

- 9 • (b)(2)(d)(Documentation Manual . . . developed . . . collaboration . . . negotiation  
10 workgroup) (establish a shared management structure to develop . . . in consultation  
11 with . . . negotiation workgroup) (Page 7);  
12 • (j)(4)(Data and Quality Task Force . . . stakeholder meeting . . . ideas . . . about data) (Page  
13 13),  
14 • (k)(2)(Models . . . readiness assessment informed by . . . family members . . . and youth) (Page  
15 14).

16 Although the Special Master has determined the implementation activities, deliverables and  
17 timelines described in Section II, Phase One are aimed in the right direction and the goals and  
18 anticipated results form a clear pathway, there lacks sufficient clarity around, Activity C, Develop  
19 Funding and what are the activities that will result in funding. The Special Master suggests this activity  
20 be updated for the December 13, 2012 Court hearing.

21 Special Master Summary Review and Comments - Family and Youth Involvement, Phase Two

22 Family and Youth Involvement, Phase Two, of the Implementation Plan will not be evaluated  
23 at this time. The Special Master will review and provide comments on Phase Two of the  
24 Implementation Plan to ensure there is a framework, expectations and the anticipated timelines  
25 described in Phase Two to indicate what will be necessary to complete an Implementation Plan for  
26 Phase Two by December 13, 2012.

27 Family and Youth Involvement Phase Two share the same goals and anticipated results as  
28 Phase One but has an implementation timeframe of 2013 and beyond as well as different set of  
29 activities and deliverables intended to incorporate family and youth in state and county

1 implementation, rollout, training and quality assurance activities.

2 Overall, Phase Two has established a sound framework and the correct expectations in the  
3 Family and Youth Involvement section of the Implementation Plan. This should provide the  
4 necessary direction to develop the additional activities for Phase Two of the Implementation Plan.  
5 There remains work to be done in developing Phase Two of the Implementation Plan describing  
6 activities on how to ensure family and youth participation occurs. For example, Phase Two,  
7 activity B, 'State and Counties will work to incorporate . . .' reads like a plan to plan, which is  
8 good, but does not describe how or what the plan is that would actually result in the family and  
9 youth being included. The parties should consider identifying activities that describe families and  
10 youths' role in providing training and technical assistance. The Special Master looks forward to  
11 additional detail in the Implementation Plan activities and deliverables on how to ensure their  
12 inclusion in the December 13, 2012 Court hearing.

13 All parties have found the family and youth voice, perspective and expertise critical in  
14 finalizing the Settlement Agreement and in developing the Implementation Plan. The Special  
15 Master and Negotiation Workgroup have added the Family Voice and the Youth Voice as one of  
16 the criteria to evaluate the options that guided the parties in reaching Settlement Agreement  
17 consensus. Family and youth participation has been emphasized throughout each phase of the  
18 Katie A. negotiation and plan development process. This section of the Implementation Plan is an  
19 attempt to acknowledge that parent and youth involvement is critical to the overall success of  
20 implementing and sustaining the Terms and Objectives of the Settlement Agreement.

21 Section III. Service Delivery and Rollout

22 The Service Delivery and Rollout Section of the Implementation Plan, Phase One, has  
23 identified goals, the activities, deliverables, timelines and anticipated results to ensure: ICC,  
24 IHBS, (and after (date to be determined), TFC), can be claimed by counties and providers to  
25 Medi-Cal; the Medi-Cal Documentation Manual is disseminated to counties and providers;  
26 information is provided to counties that ICC and IHBS are an entitlement under the law; a  
27 description of the identification and referral process, including those entitled to the services is  
28 provided; implementation of ICC and IHBS for availability statewide; dissemination  
29 statewide of the CPM Readiness Tool.

30

1 Special Master's Summary Evaluation –Service Delivery and Rollout, Phase One

2 Service Delivery and Rollout, Phase One of the Implementation Plan identifies goals, the  
3 activities, deliverables and timelines to ensure: ICC and IHBS, (and after (date to be  
4 determined), TFC), are claimable by counties; issuance of a notice to counties regarding  
5 entitlements and subclass definition; the development and dissemination statewide of the  
6 CPM Readiness Tool; issuance of the Medi-Cal claiming and documentation  
7 requirements/manual; implementation of ICC and IHBS implementation of ICC and IHBS for  
8 availability statewide December 31, 2012.

9 The Special Master has determined the implementation activities, deliverables and  
10 timelines described in Phase One have the sufficient steps and correct timeframes identified  
11 that, when accomplished, will have

12 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

13 Paragraph 19

- 14 • (a)(Services delivered in a coordinated, comprehensive . . . all-inclusive approach)

15 (Page 5);

- 16 • (d) (address need for certain class members . . . more intensive needs . . . subclass to

17 receive mental health services in . . . own home . . . appropriate to their needs

18 facilitate reunification . . . safety, permanence and well-being) (Page 5-6);

19 Paragraph 20

- 20 • (a)(1) (develop and disseminate Documentation Manual) (Page 6-7);

- 21 • (g)(1) (guidance on state and federal laws . . . to implement this Agreement . . .

22 provide ongoing technical assistance to include manuals, policy-guidance, education

23 and training, program development . . . fidelity . . . to principles . . . CPM) (Page 11);

- 24 • (k)(1-7)((Models . . . conduct readiness . . . collaborative input . . . select counties . . .

25 transfer knowledge) (Page 14-15).

26 The activities and steps to develop, finalize and implement the CPM Readiness Tool are  
27 not sufficiently described. It's the Special Master's understanding that the Negotiation

1 Workgroup is currently finalizing a work plan, with specifics regarding the Readiness Tool's  
2 development and implementation. Additionally, implementation of ICC and IHBS for  
3 statewide availability is not the same as ICC and IHBS being provided statewide. This was  
4 discussed in some detail in Section I, Core Practice Component, Part A. It will be important  
5 to add this additional detail into the Phase Two Implementation plan that will be presented at  
6 the December 13, 2012 hearing.

7 Special Master Summary Review and Comments - Service Delivery and Rollout, Phase Two

8 Service Delivery Rollout, Phase Two, of the Implementation Plan will not be evaluated at  
9 this time. The Special Master will review and provide comments on Phase Two of the  
10 Implementation Plan to ensure the framework, expectations and the anticipated timelines  
11 described in Phase Two indicating what will be necessary to complete an Implementation Plan  
12 for Phase Two by December 13, 2012.

13 Service Delivery and Rollout, Phase Two, shares the same goals and anticipated results as  
14 Phase One, but has an implementation timeframe of 2013 and beyond as well as different set  
15 of activities, deliverables, and timelines intended to: encourage counties and providers to  
16 utilize the CPM Guide in all services; provide consultation and guidance for counties  
17 regarding subclass members; clarify the relationship between ICC and IHBS and medical  
18 necessity; develop activities and timelines for ensuring that ICC, ICC, (date to be determined),  
19 TFC), are available statewide to subclass members; select Early Implementer Counties and  
20 utilize feedback for continuous improvement and to promote statewide adoption of the CPM;  
21 provide technical assistance and support to counties regarding CPM Readiness Tool and  
22 implementation activities; determine TFC billing codes and implement TFC statewide.

23 Overall, Phase Two has established a sound framework and the correct expectations in  
24 the Service Delivery and Rollout section of the Implementation Plan. The goals and  
25 framework of this section are very powerful and outcome orientated. Excellent. It should  
26 provide the necessary direction to develop the additional activities for Phase Two of the  
27 Implementation Plan. Although there remains work to be done in developing Phase Two of  
28 the Implementation Plan, the goals for this section easily align with identified activities.  
29 Activities that result in deliverables, or reference a process and/or a plan, need to be described  
30 in more detail in order to determine if the activity is calculated or has the power to accomplish  
31 the intended results for the activity. Not all the activities in this section lack the necessary

1 details.

2 The Goals and Anticipated Results for Service Delivery and Rollout, Phases One and  
3 Two, align with the Settlement objectives and terms of the Settlement Agreement and  
4 establish the necessary framework and expectations for the Implementation Plan. Activities  
5 and timelines are identified and appear reasonable for providing training and developing  
6 initial adoption strategies for the CPM Guide and noticing counties. TFC activity is well  
7 described but timelines need to be established as suggested earlier in Section I, Part A. TFC  
8 timelines should be updated in the December 13, 2012 report to the Court. Activities and  
9 timelines around decision-making and deliverables for the CPM Fiscal Taskforce and JMT  
10 need to be elaborated on and described in more detail. It's not clearly described how these  
11 two Taskforce products will get developed, recommendations made and decisions reached  
12 that lead to supporting the implementation of CPM statewide. Additionally, the activities and  
13 deliverables that will lead to ensuring that ICC, IHBS (and after (date to be determined), TFC)  
14 are available to subclass members statewide need to be sufficiently described. At this time, it  
15 reads like a plan to plan. The activities will need to be described including the steps/process  
16 that will be used to 'identify class members in order to link to services' and how the 'CPM  
17 and IHBS, ICC and TFC will be brought to scale statewide'.

18 The Special Master is impressed with the range of activities and deliverables set forth in  
19 Phase Two of this section. It will be critical, as the parties further develop Phase Two of the  
20 Implementation Plan for the Court's review, that it includes activities, deliverables and  
21 timelines necessary to: implement and sustain the CPM approach at the county level and  
22 describe how it will incorporate the CPM Fiscal Task Force recommendations; develop  
23 activities for ensuring that IHBS, ICC, (and after (date to be determined), TFC) are available  
24 to subclass members; identify the process used to select the Early Implementer Counties. The  
25 Special Master is aware that the Negotiation Workgroup is focused on proposing a range of  
26 activities, deliverables and timelines for Phase Two Service Delivery and Rollout that address  
27 the issues identified above.

28 Section IV. Training and Technical Assistance

29 Training and Technical Assistance section of the Implementation Plan, Phase One,  
30 identifies goals, the activities, deliverables, timelines and anticipated results intended to



1 ensure: a process is underway to develop cross-system training curriculum and education  
2 materials; instruction to state and county auditors on billing and documentation guidelines;  
3 training for counties and providers on Medi-Cal documentation, coverage and billing ICC and  
4 IHBS; collaboration with counties on the provision of on-going technical assistance and  
5 support on activities identified in the readiness tool.

6 Special Master's Summary Evaluation – Training and Technical Assistance, Phase One

7 Training and Technical Assistance, Phase One, includes the Implementation Plan  
8 activities, deliverables and timelines to ensure: a cross-system training curriculum and  
9 educational materials for staff; instruction to state and county auditors on billing and  
10 documentation; initial and ongoing training to county MHP and providers on Documentation  
11 Manual, coverage and billing; collaboration with counties on the provision of on-going  
12 technical assistance and support on activities identified in the readiness tool. The Special  
13 Master has determined the implementation activities, deliverables and timelines described in  
14 Phase One have the sufficient steps and correct timeframes identified that, when accomplished,  
15 will have

16 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

17 Paragraph 19

- 18 • (b)(Support . . . delivery of a services structure . . . supports a core practices and services . . .)(Page  
19 5);
- 20 • (c)Support . . . sustainable solution . . . along with training and education . . .)(Page 5);

21 Paragraph 20

- 22 • (f)(1-3)( . . . develop cross system training curriculum and materials for . . . staff)( . . .  
23 initiate a request to . . . STEC . . . develop process and timeline . . .)( . . . materials are  
24 intended to be used . . . counties and providers . . . including a joint tool kit . . .  
25 teams)( . . . curriculum . . . promote . . . teaming . . .)(Page 10-11);
- 26 • (g)(2)(Ensuring audits compliance . . . follow . . . guidelines developed . . . consistent . . .)(Page 11)

27 Special Master Summary Review and Comments – Training and Technical Assistance, Phase Two



1 Training and Technical Assistance, Phase Two of the Implementation Plan will not be evaluated  
2 at this time. The Special Master will review and provide comments on Phase Two of the  
3 Implementation Plan to ensure the framework, expectations and the anticipated timelines described  
4 in Phase Two indicate what will be necessary to complete an Implementation Plan for Phase Two by  
5 December 13, 2012.

6 Overall, Training and Technical Assistance, Phase Two, has established a sound framework and  
7 the correct expectations for the Implementation Plan. This should provide the necessary focus and  
8 direction to develop the additional activities for Phase Two of the Implementation Plan. Training  
9 and Technical Assistance, Phase Two, shares the same goals and anticipated results as Phase One  
10 but has an implementation timeframe of 2013 and beyond as well as different set of activities,  
11 deliverables, and timelines designed to: determine and develop curriculum and coaching products;  
12 determine the content of a County Implementation Team Guide; develop and identify a Statewide  
13 Training Plan (CPM) and other activities targeting training and technical assistance to counties,  
14 providers and stakeholders; provide policy guidance, education and training aligned with CPM.

15 Overall, Training and Technical Assistance, Phase Two of the Implementation Plan generally  
16 needs more specifics on the activities that will result in the deliverables. The Special Master  
17 recognizes that this section is currently under development with the Negotiation Workgroup and it is  
18 reasonable to expect the necessary specific details will emerge and be ready for the December 13,  
19 2012 Court hearing.

20 Section V: Data and Quality Assurance

21 Data and Quality Assurance Section, Phase One of the Implementation Plan, identifies  
22 goals, the activities, deliverables, timelines and anticipated results intended to: establish an  
23 Accountability, Communication and Oversight (ACO) Taskforce; establish a short term  
24 method to track use of ICC, IHBS (and after (date to be determined), TFC), pending further  
25 development of the Data and Quality Assurance component in Phase Two.

26 Special Master's Summary Evaluation – Data Collection and Quality Assurance

27 Data and Quality Assurance Phase One, includes the Implementation Plan goals, the  
28 activities, deliverables, timelines and anticipated results to ensure: the Accountability  
29 Communication and Oversight (ACO) Taskforce begins meeting and makes recommendations  
30 consistent with its Charter; an initial plan that identifies data sets capable of measuring those

1 in need of and those receiving mental health services, pending further development of a cross  
2 system Data and Quality Assurance Component intended to emerge during the  
3 implementation of Phase Two. The charters establishing the ACO Task Force were developed  
4 and adopted by the Negotiation Workgroup (the ACO Charter can be found in Exhibit 5, at  
5 the end of this report).

6 The Special Master has determined implementation activities, deliverables and timelines  
7 have the sufficient steps and correct timeframes identified that, when accomplished, will have  
8 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

9 Paragraph 19

- 10 • (b)(Support . . . delivery service structure . . . supports a . . . practice . . . services model . . .)(Page  
11 5);
- 12 • (c)(Support . . . sustainable solution . . . standard methods . . . quality based oversight . . .)(Page 5);

13 Paragraph 20

- 14 • (i)(1-5)(. . . establish a Data and Quality Taskforce)(Establish a method to track . . .  
15 ICC . . . IHBS . . . TFC)(Utilize External Quality Review and California Child and  
16 Family Services Review requirements . . . develop a plan . . . collection of  
17 data . . .)(Collect data elements . . . to evaluate utilization . . . access to care.)(. . .  
18 stakeholder meeting . . . what data . . . produce and post . . . ) ( . . . to post data on . . .  
19 websites)(Page 13-14).

20 Special Master Summary Review and Comments – Data and Quality Assurance, Phase Two

21 Data and Quality Assurance, Phase Two, of the Implementation Plan will not be  
22 evaluated at this time. The Special Master will review and provide comments on Phase Two  
23 of the Implementation Plan to ensure there is a framework, expectations and the anticipated  
24 timelines described in Phase Two to indicate what will be necessary to complete an  
25 Implementation Plan for Phase Two by December 13, 2012.

26 Overall the Data and Quality Assurance, Phase Two, has established a sound framework  
27 and the correct expectations for the Implementation Plan. This should provide the necessary

1 focus and direction to develop the additional activities for Phase Two of the Implementation  
2 Plan.

3 Data and Quality Assurance, Phase Two, shares the same goals and anticipated results as  
4 Phase One, but different activities, deliverables and timelines and has an implementation  
5 timeframe of 2013 and beyond as well as different set of activities intended to ensure: the  
6 Data Mapping Group inventories the current array of ongoing data, statewide; the ACO  
7 Taskforce begins meeting and makes recommendations; the Joint Management Structure  
8 established by CDHCS and CDSS develops outcome and accountability linking to the ACO;  
9 the Joint Management Structure considers ACO recommendations and adopts cross-system  
10 quality assurance system; a proposal for production and posting of data is developed; ideas are  
11 solicited from stakeholders about what data should be routinely produced and posted; posting  
12 all report and timelines on Websites.

13 Overall, this section of the Implementation Plan needs more specifics on the activities and  
14 deliverables. The Special Master recognizes that much of the detail needed will be defined  
15 and determined in part by the work of the ACO Mapping, ACO Taskforce and the Joint  
16 Management Taskforce and ultimately by the decisions made by CDHCS and CDSS.  
17 Accordingly, it's reasonable to expect additional detail for Phase Two of the Implementation  
18 Plan on the Data and Quality Assurance System and Joint Management Structure is to be  
19 discussed and may or may not be determined by the December 13, 2012 Court hearing. It  
20 may be that the work of the Taskforces will have not progressed to a point where the options  
21 for either the Joint Management Structure and the Data and Quality Assurance System are  
22 available or that CDHCS and CDSS have not made decisions on either recommendation. In  
23 either case, it is expected the Court would be informed at the December 13, 2012 review on  
24 the status of these Taskforces and/or when a decision is expected by CDHCS and CDSS.

25 Section VI. Joint Management Structure

26 Joint Management Structure (JMS) of the Implementation Plan, Phase One, identifies  
27 goals, activities, deliverables, timelines and anticipated results intended to: begin convening  
28 monthly meetings of the Joint Management Taskforce (JMT) and the Core Practice Model  
29 (CPM) Taskforce.

30

1 Special Master's Summary Evaluation – Joint Management Structure

2 Joint Management Structure, Phase One, identifies the convening of the monthly meetings  
3 of the JMT and CPM Fiscal Taskforce as the first step that is expected to result intended in  
4 recommendations that, when implemented, will successfully satisfy key terms and objectives  
5 of the Settlement Agreement.

6 The Special Master has determined Phase One implementation activities, deliverables and  
7 timelines, have the sufficient steps and correct timeframes identified that when accomplished,  
8 will have

9 satisfied, in part, the following Terms and Objectives of the Settlement Agreement:

10 Paragraph 19

- 11 • (b)(Support . . . delivery service structure . . . supports a . . . practice . . . services model . . .)(Page  
12 5);
- 13 • (c)(Support . . . sustainable solution . . . standard methods . . . quality based oversight . . .)(Page 5);

14 Paragraph 20

- 15 • (d) )(1-4). . . establish a Joint Management Taskforce)(Establishment . . . joint  
16 management structure between CDMH and CDSS . . .)(Building upon existing  
17 relationship . . . state agencies . . . Creating a cross system management . . . at the  
18 county/local level.)(Developing models . . . local agencies . . . work more effectively  
19 together . . .) (Page 9-10).

20 The impact of this first step should not be underestimated. The decisions that will emerge  
21 at this end of this process will ultimately affect the trajectory of meeting many, if not all, of the  
22 terms and objectives set forth in Katie A. Settlement Agreement.

23 Special Master Summary Review and Comments – Joint Management Structure, Phase Two

24 Joint Management Structure (JMS), Phase Two, of the Implementation Plan will not be  
25 evaluated at this time. The Special Master will review and provide comments on Phase Two of  
26 the Implementation Plan to ensure the framework, expectations and the anticipated timelines  
27 described in Phase Two indicate what will be necessary to complete an Implementation Plan for

1 Phase Two by December 13, 2012.

2 Overall, the Joint Management Structure Section, Phase Two, has established a solid and  
3 clear framework and the correct expectations for the Implementation Plan. This should provide  
4 the necessary focus and direction to develop the additional activities for Phase Two of the  
5 Implementation Plan.

6 Joint Management Structure (JMS), Phase Two, shares the same goals and anticipated  
7 results as Phase One with different activities, deliverables and timelines and has an  
8 implementation timeframe of 2013 and beyond as well as different set of activities intended to  
9 ensure: JMS is established and that it incorporates CPM; JMS at the county level is  
10 encouraged; the JMT issues communication and guidance regarding the State and County  
11 structures; CDHCS and CDSS promote the JMS and ACO structures and CPM fiscal strategies  
12 statewide; analysis and evaluation of utilization, and access to care data specific to the class and  
13 subclass; the data is shared publicly through postings.

14 Timelines are not yet identified in Phase Two on when, following the JMT  
15 recommendation on establishing a JMS, a decision will be made on establishing the JMS. It's  
16 also not described how the CPM taskforce recommendations will be integrated into the  
17 Implementation Plan or how the JMT or the JMS, if established, will incorporate the  
18 recommendations. Activities focused on analyzing and posting data for the public need  
19 additional description regarding how they tie together with the activities and deliverables in  
20 Section V. Data and Quality Assurance. The Special Master would expect the Court, at the  
21 December 13, 2012 hearing on the entire Implementation Plan, particularly with Phase Two  
22 activities, receive an update on the progress of the JMT in addressing the tasks and deliverables  
23 identified in their Charter. The Charter adopted by the Katie A. Negotiation Workgroup  
24 establishing the JMT sets forth a direction and a set of tasks that, by all accounts, should yield  
25 exceptional recommendations for DSS and DHCS to consider before making its decision.

26

27 Special Master's Findings for Phase One, and Review and Comments on Phase Two

28 The Special Master, before discussing Findings for Phase One and the Special Master's  
29 Review and Comments on Phase Two, wants to identify key individuals, from the State and  
30 Plaintiff's Team. Without their professionalism, tireless patience, persistence, expertise, and  
31 commitment to see the Katie A. Settlement Agreement fulfill its potential, the Implementation



1 Plan before the Court would not have been as clear or thoughtful in addressing the requirements  
2 set forth in the Settlement Agreement.

3 The plan exceeds expectations and goes beyond just sufficiently describing Phase One, it  
4 lays out a solid and clear framework and expectation for further development of Phase Two  
5 activities and deliverables. Although the Implementation Plan was developed jointly, the  
6 Special Master requested the State Team to take the lead in drafting the Implementation Plan  
7 while collaborating with the plaintiffs and the Katie A. Negotiation Workgroup. Taking the  
8 lead on this assignment turned out to be no easy task for the State Team when you consider the  
9 breadth and scope of what needs to be addressed and the time, resources and personal energy  
10 required. Putting all the pieces together in order to draft the Implementation Plan before the  
11 Court, incorporating input from the equally thoughtful, insightful and passionate plaintiffs and  
12 other members of the Negotiation Workgroup, and integrating their comments, edits and  
13 options, was a herculean effort and accomplishment.

14 There are too many individuals to thank by name but the State Team, including its new  
15 members, and the Deputy Attorney Generals assigned to this matter from the Department of  
16 Justice need to be provided a special thanks and appreciation. The leadership and  
17 professionalism of the entire State team should be commended. I do want to single out the  
18 leadership, tireless support and commitment provided by Greg Rose, Deputy Director, State  
19 Department of Social Services and Dina Kokkos-Gonzales, Chief, Program Policy and Quality  
20 Assurance Branch, Mental Health Services Division, State Department of Health Care Services  
21 representing their Directors, Will Lightbourne, State Department of Social Services and Toby  
22 Douglas, State Department of Health Care Services. I also want to thank two members of the  
23 Plaintiff's Team, Kim Lewis, Managing Attorney, California, National Health Law Program  
24 and Patrick Gardner, Deputy Director, National Center for Youth Law, for their tireless  
25 commitment, professionalism, and thoughtfulness in working collaboratively with the State  
26 Team in drafting the Implementation Plan.

27 Findings Phase One:

28 The following Implementation Plan, Phase One activities and deliverables have  
29 the sufficiency, that when implemented, on or before December 31, 2012 satisfy  
30 specific sections or sub-sections, Paragraph 20, of the Settlement Agreement:

- 31
- Develop and Disseminate a Medi-Cal, ICC and IHBS Documentation Manual;



- 1 • Identify two arrays of services, ICC and IHBS as part of the Medi-Cal Menu of Services;
- 2 • Develop a Core Practice Model CPM Guide;
- 3 • Describe how the provision of services are consistent with the Core Practice Model;
- 4 • Collaboratively develop the Medi-Cal Documentation and CPM Guide;
- 5 • Post Medi-Cal Documentation and CPM Guide for public comment;
- 6 • Establish a Joint Management Taskforce;
- 7 • Establish a CPM Fiscal Taskforce;
- 8 • Establish an Accountability, Communication and Oversight Taskforce (Data and Quality
- 9 Assurance);
- 10 • Initiate a request to the Statewide Training and Education Committee to develop curriculum.

11 In addition, most, if not all Phase One activities and deliverables met, in part, the  
12 terms of the Agreement and objectives set forth in Paragraph 19” of the Settlement  
13 Agreement.

14 Review and Comments Phase Two:

15 The Special Master’s Review and Comments on Phase Two of the Implementation  
16 Plan have, in part, been presented in earlier sections of this report. Overall, Phase Two  
17 presents a more complete framework, an extensive set of expectations and deliverables  
18 that was more than was expected. That is commendable. The Implementation Plan has  
19 begun the process of developing descriptive activities, defined deliverables and projecting  
20 timelines that will need to be refined and updated, as necessary, when Phase Two is  
21 reviewed at the December 13, 2012 Court hearing. Consistent observations across every  
22 section of the Implementation plan Phase Two activities, is that the plan needs to describe,  
23 with some detail, how the activity will go about accomplishing what it intends.

24 The Special Master will now summarize and comment on key sections of the  
25 Implementation Plan. While this section is repetitive, it is the one section of the Report  
26 where all the sections can come together to reflect the whole plan and thus be commented  
27 on.

28 Section I, Core Components, A and B, Phase Two, anticipates finalizing and  
29 disseminating the Core Practice Model (CPM) Guide and initiate basic training statewide.

1 Concurrently, it identifies the need to develop a plan/strategy for statewide adoption of the  
2 CPM Guide. It also anticipates determining the best services/model program for  
3 California and the components eligible for Medi-Cal coverage. This is a 'giant first step'  
4 in accomplishing Section I goals.

5 The Special Master and the parties recognize that it will take a sustained but flexible  
6 effort over many years, well beyond the Court's jurisdiction, to take the Core Practice  
7 Manual (CPM) to scale. The Negotiation Workgroup has identified many of the  
8 opportunities and challenges ahead in moving CPM from a practice manual on the ground  
9 to an adopted and utilized practice across Mental Health and Child Welfare state and local  
10 systems. The experiences of the Los Angeles County implementation of Katie A. and  
11 CDSS California Partners in Permanency (CAPP) implementation have highlighted the  
12 challenges in developing, implementing and utilizing a unified practice approach across  
13 Child Welfare and Mental Health agencies and work cultures. The Workgroup is  
14 continuously informed by its membership on the strategies, activities, successes and  
15 challenges of Los Angeles and CAPP efforts in the implementation of the CPM approach.  
16 Through this process, the Special Master has become all too aware of the importance data  
17 and quality assurance can have in improving practice. Although not specifically identified  
18 in this Section, the experiences from Los Angeles and CDSS CAPP implementation  
19 underscore the importance and impact that data and quality assurance can have in  
20 promoting, improving and sustaining the effective practices. The importance of the role  
21 that data and quality assurance has in promoting and sustaining statewide adoption of the  
22 CPM approach should not be overlooked. Section V of the Implementation Plan, Data  
23 and Quality Assurance, will be evaluated elsewhere in the Special Master's Report.

24 The Special Master remains concerned about the time required to resolve the TFC  
25 questions. The time needed to resolve this matter has exceeded the Special Master's  
26 timeline presented to the Court in earlier reports. The activities outlined in Section I are  
27 reasonable to resolve the TFC questions. Establishing timelines has become problematic  
28 for the parties. Upon my direction, the State established a series of timelines to resolve  
29 the TFC questions which have not been accepted by the plaintiffs at the current time. The  
30 State should be commended for being flexible in the waning hours of finalizing this plan  
31 for meeting the plaintiffs interests and agreeing to postpone establishing the date. The

1 parties will evaluate the progress over the next few months and should have resolved this  
2 matter on or before the December 13, 2012 Court hearing. The TFC remains a work in  
3 progress with the following questions not resolved at this time: which components of TFC  
4 are covered under Medi-Cal and which are Title IV-E eligible; what are the preferred  
5 services/models and how the services/components should be claimed, if at all, to Medi-  
6 Cal. Regrettably, this has taken longer than all parties would have desired. There are  
7 numerous reasons for this delay, but primarily the delay is due to the parties taking a fresh  
8 look at what the State of California wants in its TFC program. This includes addressing  
9 the range of financing options, services array, provider qualifications and accountability.  
10 The Special Master feels confident that the national consultants working with CDHS,  
11 CDSS, Plaintiffs and the relevant subgroups of the Negotiation Workgroup will resolve  
12 this matter with an elegant solution within the timeframe identified in Phase Two of the  
13 Implementation Plan to be reviewed by the Court, December 13, 2012.

14 Section II, Phase Two, Family and Youth Involvement, identifies expectations and  
15 activities for family and youth to be engaged in meaningful participation at the practice,  
16 program and system levels and all phases of implementation of CPM. Initial activities have  
17 been identified and move in the correct direction. Additional activities and deliverable may  
18 need to be added to advance this goal. The significance of this section in the overall success  
19 of the Implementation Plan was discussed earlier in this report.

20 Section III, Phase Two, Service Delivery and Rollout aims at developing implementation  
21 activities and strategies that will bring to scale statewide - CPM for all class members and  
22 ICC, IBHS and TFC in the context of CPM for all subclass members. As discussed earlier in  
23 this report, additional detail needs to be described in the areas of activities and deliverables.  
24 It's the Special Master's understanding that the Negotiation Workgroup is working on this  
25 section and will have further developed and refined Phase Two for the December 13, 2012  
26 Court hearing.

27 Section IV, Phase Two, Training and Assistance, focuses on providing the additional  
28 resources to build system and staff capacity. The goals and expectations are very powerful  
29 and establish the correct tone. Parallel, on a separate track, are the pending recommendations

1 from the CPM Fiscal Task Force and Joint Management Task Force that will be considered by  
2 CDHCS and CDSS. The decision made by CDHCS and CDSS should provide the policy and  
3 administrative direction, resources and practical solutions to support the implementation of  
4 the each of the six sections, especially, Section IV, Training and Technical Assistance. The  
5 Special Master is looking forward to further development of Phase Two and the Court's  
6 review on December 13, 2012.

7 Section V, Phase Two, Data and Quality Assurance, and Section VI, Phase Two, Joint  
8 Management Structure implementation creates exciting and new opportunities. There is  
9 inherent power in the selected methods and processes that, over time at the state and county  
10 level, can transform how the Child Welfare and Children's Mental Health systems collaborate  
11 to effect outcomes for children and families and fulfill the Terms and Objectives of the Katie  
12 A. Settlement Agreement. The Charters to establish the two Task Forces set forth a  
13 framework and expectation providing direction and focus for these two sections of the  
14 Implementation Plan.

15 These two sections of the Implementation Plan and the decisions that will be reached by  
16 CDHCS and CDSS in Phase Two, will have a lasting effect on the sustainability of what is  
17 intended in the Settlement Agreement. DHCS and CDSS, informed by the recommendations  
18 from the Joint Management Task Force, the Accountability, Communication and  
19 Authorization Task Force, and the Core Practice Fiscal Task Force will make decisions on:  
20 the Joint Management Structure to be put in place, its scope of responsibility and decision  
21 making authority; the collaborative Data and Quality Assurance system, its cross system and  
22 collaborative framework, the quality improvement approach, and use of data and review  
23 processes; the Core Practice Model strategies and resources to promote statewide adoption;  
24 the fiscal and administrative decisions, incentives, and tools. These are foundational decisions  
25 intended, over the long term, to achieve most, if not all of the Terms and Objectives,  
26 Paragraph 19, (a-d) set forth in the Settlement Agreement. It's likely that all these decisions  
27 will be reached after January 2013. The Special Master looks forward to the work of the  
28 Taskforces and their recommendations. It was anticipated that some of the work of the  
29 Taskforces and CDHCS and CDSS decision-making would occur after January 2013. Current  
30 timelines established for convening JMT and Core Practice Model Fiscal is October 2012 and  
31 for the Accountability Communication and Oversight Taskforce (Data and Quality Assurance)

1 is February 2013. Parties should be prepared at the December 13, 2012 Court hearing to  
2 discuss Phase Two, Implementation Plan deliverables and timelines and how they affect the  
3 implementation of other Sections of the Implementation Plan.

4 **PART III**

5 **SPECIAL MASTER'S RECOMMENDATIONS TO THE COURT**

6 Based upon the sufficiency review of the Proposed Katie A. Implementation Plan to  
7 determine if Phase One is reasonably calculated to ensure that State Defendants meet the  
8 terms of the Agreement and objectives set forth in Paragraph 19, and a general review and  
9 comment of Phase II, framework, expectation and timelines, the Special Master makes the  
10 following findings and recommendations.

11  
12 Recommendation 1:

13 The Special Master finds that the Katie A. Implementation Plan, Phase One is reasonably and  
14 sufficiency calculated to meet the terms of the agreement and objectives set forth Paragraph  
15 19 as identified in this report, and recommends the Court approve the Katie A.  
16 Implementation Plan, Phase One.

17  
18 Recommendation 2:

19 The Special Master finds that the Katie A. Implementation Plan, Phase Two reasonably  
20 describes the 'framework and expectations and anticipated timelines' and will after addressing  
21 the Special Master's comments, be sufficient to meet the expectations of the Court and  
22 complete an Implementation Plan for Phase Two by December 13, 2012.

23  
24  
25  
26 Recommendation 3:

27 The Special Master recommends the Court review the entire Katie A. Implementation Plan,  
28 Phase One and Two at the December 13, 2012 Court hearing.

29  
30 In closing, as Special Master I would like to thank the Court for affording me the

1 privilege of serving as Special Master for the Katie A. case. I am very proud of the  
2 remarkable accomplishments made by the parties and Negotiation Workgroup as reflected in  
3 the Implementation Plan, and I look forward to the opportunity to continue to work with the  
4 parties and the Court in preparing for the Court's Implementation Plan Review, Phase One  
5 and Two on December 13, 2012.

6  
7 Dated: August 28, 2012

8 Respectfully submitted

9  
10 /s/ Richard Saletta, LCSW

11 Handwritten signature of Richard Saletta, LCSW.

12 Richard Saletta, LCSW  
13 Special Master  
14



### CERTIFICATE OF SERVICE

Case Name: KATIE A., et al. v. BONTA, et al.

No. CV-02-05662 AHM (SHx)

I hereby certify that on August 28, 2012, I electronically filed the following documents with the Clerk of the Court by using the CM/ECF system:

**SPECIAL MASTER'S REPORT ON PROGRESS TOWARD COMPLETION OF  
THE KATIE A. IMPLEMENTATION PLAN**

Participants in the case who are registered CM/ECF users will be served by the CM/ECF system.

I further certify that some of the participants in the case are not registered CM/ECF users. On August 28, 2012, I have mailed the foregoing document by First-Class U.S. mail, postage prepaid, for delivery within three (3) calendar days to the following non-CM/ECF participants:

Catherine J. Pratt, Esq.  
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201 Centre Plaza Dr., Suite 1  
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Monterey County Counsel  
Children's Services Division  
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Monterey Park, CA 91754-2143

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct and that this declaration was executed on August 28, 2012, at Los Angeles, California.

M. Chacon  
Declarant

/s/M. Chacon  
Signature