

June 21, 2022

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**EXECUTIVE SUMMARY**

**ALL COUNTY LETTER NO. 22-43**

The purpose of this All County Letter is to inform counties of the recently revised In-Home Supportive Services Quality Improvement Action Plan templates. Commencing in Fiscal Year 2022-23, the revised templates will be required when the California Department of Social Services issues a Quality Improvement Action Plan request for non-compliance with either Timely Reassessments, Timely Community First Choice Option Reassessments, or Timely Applications requirements.



KIM JOHNSON  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



GAVIN NEWSOM  
GOVERNOR

June 21, 2022

ALL COUNTY LETTER NO. 22-43

TO: ALL COUNTY WELFARE DIRECTORS  
ALL IN-HOME SUPPORTIVE SERVICES PROGRAM MANAGERS

SUBJECT: IN-HOME SUPPORTIVE SERVICES QUALITY IMPROVEMENT  
ACTION PLAN TEMPLATES

REFERENCE: COMMUNITY FIRST CHOICE OPTION  
[STATE PLAN AMENDMENT 13-007](#); IN-HOME SUPPORTIVE  
SERVICES PLUS OPTION [STATE PLAN AMENDMENT 09-006](#);  
[ALL COUNTY LETTER NO. 13-110](#), DATED  
DECEMBER 31, 2013; ALL COUNTY INFORMATION NOTICE  
[I-58-21](#), DATED JUNE 14, 2021

The purpose of this All County Letter (ACL) is to inform counties of the recently revised In-Home Supportive Services (IHSS) Quality Improvement Action Plan (QIAP) templates. Commencing in Fiscal Year (FY) 2022-23, the revised templates will be required when the California Department of Social Services (CDSS) issues a QIAP request for non-compliance with either Timely Reassessments, Timely Community First Choice Option Reassessments, or Timely Applications requirements.

## BACKGROUND

As set forth in the Community First Choice Option (CFCO) State Plan Amendment ([SPA](#)) [13-007](#), the In-Home Supportive Services Plus Option [SPA 09-006](#), and the CDSS IHSS Quality Assurance/Quality Improvement (QA/QI) Policy Manual (released via [ACL No. 13-110](#)), when CDSS determines that a county is out of compliance with IHSS regulations, CDSS policy, and/or state statutes, CDSS will issue a QIAP request. When CDSS requests a QIAP from a county, the county must include in its QIAP how and when an issue will be resolved.

## **CDSS IN-HOME SUPPORTIVE SERVICES QUALITY IMPROVEMENT ACTION PLAN REQUESTS**

As outlined in [All County Information Notice No. I-58-21](#), CDSS requests QIAPs from counties that fail to maintain a timely reassessment compliance rate of at least 80 percent for all non-CFCO recipients, a timely reassessment compliance rate of at least 90 percent for CFCO recipients, and an application processing compliance rate of at least 80 percent (based on a 12-month FY average). The CDSS determines compliance every August, upon receipt of the final FY data (i.e., CMIPS June data), and requests QIAPs from non-compliant counties that identify how the county will resolve their compliance issues prior to the end of the FY the QIAP was requested.

When CDSS requests a QIAP from a county, the county must submit a QIAP for review and approval within 30 days of a county's receipt of the QIAP request and return it to CDSS Program Integrity Unit (PIU), via email at [ihss-pi@dss.ca.gov](mailto:ihss-pi@dss.ca.gov). The response must address all QIAP questions and outline the county's overall plan for achieving compliance. The QIAPs are reviewed by CDSS PIU staff and are approved or returned for re-write within 15 working days of CDSS' receipt.

Counties placed on QIAPs remain on them for the entire FY and are only removed from QIAPs if compliance is achieved at the end of the FY for which the QIAP was initiated. Counties that achieve compliance receive a QIAP removal letter, informing them they are no longer required to update CDSS. Counties that fail to become compliant within the FY are required to provide another QIAP for CDSS review and approval for the next FY.

## **IN-HOME SUPPORTIVE SERVICES QUALITY IMPROVEMENT ACTION PLAN TEMPLATE REVISIONS**

The purpose of IHSS QIAP templates is to assist counties with developing their QIAPs by providing specific information necessary for CDSS to obtain a comprehensive understanding of each county's compliance challenges; and determine if a county's proposed plan adequately addresses the challenges indicated. The templates also allow CDSS to identify opportunities where CDSS may assist counties in their efforts to achieve and maintain compliance.

In FY 2021-22, CDSS convened a workgroup to provide county participants an opportunity to review, discuss, and provide input regarding the *Timely Application*, *Timely Reassessment* and *CFCO Reassessment* QIAP templates used by counties when responding to CDSS' requests for QIAPs due to non-compliance. The CDSS reviewed the collective feedback and revised the templates accordingly. Additionally, CDSS, along with county participants, agreed upon a combined *Timely Reassessment/CFCO Reassessment QIAP template* which affords counties greater efficiency.

Commencing in FY 2022-23, the revised templates (see attachments) will be required when the CDSS issues a QIAP request for non-compliance with either Timely Reassessments, Timely CFCO Reassessments, or Timely Applications requirements.

If you have any questions or need additional guidance regarding the information in this letter, contact the Adult Programs Division; Fiscal, Appeals and Benefit Programs Branch; Benefit Programs and Program Integrity Bureau; Program Integrity Unit via email at [ihss-pi@dss.ca.gov](mailto:ihss-pi@dss.ca.gov).

Sincerely,

***Original Document Signed By***

LEORA FILOSENA, P.M.P.  
Deputy Director  
Adult Programs Division

**Request for Quality Improvement Action Plan (QIAP)  
To Address In-Home Supportive Services (IHSS) Reassessment and/or Community First  
Choice Option (CFCO) Reassessment Non-Compliance in Fiscal Year 20##-##**

**For the California Department of Social Services (CDSS) Use Only:**

- ☐ This QIAP Questionnaire Must Address Timely Overall Reassessments.  
☐ This QIAP Questionnaire Must Address Timely CFCO Reassessments.  
☐ This QIAP Questionnaire Must Address both Timely Overall Reassessments and CFCO Reassessments.

**Counties must provide responses to Sections 1 and 2 and Applicable QIAP Section (3 or 4)**

**Section 1. General County Information:**

1. What is your current total caseload?
2. Do you currently have any uncovered caseloads? Yes ☐ No ☐. If Yes, how many?
3. Indicate your county's number of overdue cases to date, as well as the age of your oldest overdue case.
4. Is overtime offered? Yes ☐ No ☐
5. Do staff utilize laptops? Yes ☐ No ☐
6. Do you have an intake unit? Yes ☐ No ☐
7. Do you have a call center? Yes ☐ No ☐
8. What is the current total number of IHSS supervisors?
9. What is the current total number of IHSS case-carrying social workers?
10. What is the current total number of IHSS social workers that perform reassessments?
11. What is the current caseload per IHSS case-carrying social worker(s)?
12. How many IHSS social workers have a reduced caseload, if applicable?
13. How many IHSS case carrying social worker vacancies does the county currently have, and if known, when do you anticipate these being filled?
14. How long does it take the county to onboard IHSS case carrying staff?
15. How many IHSS supervisors are on protected leave, and if known, when are they expected to return?
16. How many social workers (that perform reassessments) are on protected leave, and if known, when are they expected to return?
17. How many IHSS Quality Assurance staff are on protected leave, and if known, when are they expected to return?
18. Please describe any challenges with staff attrition.
19. What percentage of your IHSS social worker staff have completed the state sponsored IHSS 101 and IHSS 102 trainings?
20. What percentage of veteran IHSS social worker staff have completed the state sponsored IHSS Refresher Course 1 and 2?
21. Have all social workers conducting IHSS Unannounced Home Visits completed the Program Integrity Training, via the IHSS Training Academy?
22. What percentage of your IHSS social worker staff have completed all the available state sponsored IHSS trainings, via the IHSS Training Academy?

**Section 2. General Assessment and Reassessment Information:**

1. How many Intakes, Reassessments, and Overdue Reassessments are expected per social worker, per month?
2. Indicate the current order in which your county conducts assessments (Initial Assessment, Change Assessment, Reassessments, Overdue Reassessments)?

3. Please provide the number of cases that are more than two years overdue and the due date of the most overdue case.
4. What is your county's case review process regarding overdue reassessments?
5. Do IHSS case-carrying social worker's reassessments need to be approved by the IHSS social worker's supervisor prior to being authorized in Case Management Information and Payrolling System?
6. Besides the monthly reassessment data provided by CDSS Program Integrity Unit, does the county have an internal process to access and monitor reassessment data/compliance rates?

### Section 3. Timely Reassessment Specific Questions:

1. What is the primary reason(s) for non-compliance?
2. Describe why the backlog in conducting timely reassessments occurred.
3. When does the county anticipate becoming compliant?
4. Describe actions the county has taken to address compliance during the last fiscal year and why these efforts have not resolved this issue. For each effort indicated, explain why these efforts were not successful.
5. Describe new actions the county plans to implement during the period of July 20## to June 20## to eliminate the backlog of overdue reassessments, and how the county plans to achieve and maintain an **80 percent** compliance rate for conducting reassessments after that date.
6. Indicate how the county plans to monitor this QIAP to ensure that actions are completed, timelines are adhered to, and needed modifications to the QIAP are presented to the CDSS for approval in a timely manner.

### Section 4. CFCO Reassessment Specific Questions:

1. What is the primary reason(s) or barriers for non-compliance with CFCO reassessments?
2. Describe why the backlog in conducting CFCO reassessments occurred?
3. When does the county anticipate becoming compliant?
4. Describe actions the county has taken to address compliance during the last fiscal year and why these efforts have not resolved this issue. For each effort indicated, explain why these efforts were not successful.
5. Describe new actions the county plans to implement during the period of July 20## to June 20## to eliminate the backlog of overdue CFCO reassessments, and how the county plans to achieve and maintain a **90 percent** compliance rate for conducting CFCO reassessments after that date.
6. Indicate how the county plans to monitor this QIAP to ensure that actions are completed, timelines are adhered to, and needed modifications to the QIAP are presented to CDSS for approval in a timely manner.
7. What is your current total CFCO caseload?
8. Indicate your county's number of overdue CFCO cases to date, as well as the age of your oldest overdue CFCO case.
9. What is the current total number of IHSS social workers that perform CFCO reassessments?
10. Do you currently have any uncovered caseloads that contain CFCO cases? Yes ☐ No ☐. If Yes, how many?
11. Please provide the number of CFCO cases that are more than two years overdue and the due date of the most overdue case.
12. Are CFCO reassessments prioritized? Please describe the county's process for conducting CFCO assessments.

13. Are there any IHSS resources that you feel would assist the county with CFCO reassessment compliance?

**QIAP Contact Information:**

1. List name(s), title(s), and email address(es) of all county staff who will be required to: monitor the plan, report **timely** quarterly status updates to CDSS (via SOC 824), participate in any necessary conference calls with CDSS, and respond to CDSS inquiries regarding the QIAP. Please note that once approved, counties may use the approved QIAP to provide quarterly status updates (please highlight updated language).
2. Name and title of person submitting QIAP, and date submitted.

**Program Integrity Unit Contact Information:**

The Program Integrity Unit (PIU) would like to remind counties to submit this QIAP Questionnaire and any updates to the information contained therein to the PIU inbox via email at [ihss-pi@dss.ca.gov](mailto:ihss-pi@dss.ca.gov).

**For CDSS Use Only:**

- ☐ The QIAP is approved as submitted  
☐ Additional information requested on:

Reviewer:

Date:

**Request for Quality Improvement Action Plan (QIAP)  
To Address In-Home Supportive Services (IHSS) Applications Pending 90 Days or More  
Fiscal Year 20##-##**

**Primary Reason(s) for Non-Compliance:**

1. Please provide the reasons why the county has been unable to complete/process at least 80 percent of IHSS applications within the required timeframe, and when the county anticipates becoming compliant.

**County Specific Information:**

1. What is the county's current total IHSS caseload?
2. How many IHSS applications does the county receive per month (average)?
3. How many IHSS applications are currently pending 90 days or more; and what was the protected date of the oldest application?
4. Are IHSS applications processed by case-carrying social workers, or does the county have a specialized intake unit?
5. If the county has an intake/application processing unit, how many staff members does it include?
6. What is the current caseload per IHSS case-carrying social worker(s)?
7. If applicable, how many IHSS social workers have reduced caseloads?
8. Do IHSS case-carrying social workers and/or IHSS application processing staff approve applications, or must they be approved by supervisors?
9. How long does it take the county to onboard IHSS intake staff?
10. Does the county utilize a call center? Yes ☐ No ☐
11. How many IHSS application processing vacancies does the county currently have, and if known, when do you anticipate these being filled?
12. Does IHSS application-processing staff utilize laptops? Yes ☐ No ☐
13. Is overtime offered? Yes ☐ No ☐
14. What is the number of IHSS supervisors responsible for ensuring the timely processing of applications?
15. How many IHSS supervisors are on protected leave, and if known, when are they expected to return?
16. How many IHSS Quality Assurance staff are on protected leave, and if known, when are they expected to return?
17. Please describe any challenges with staff attrition.
18. What percentage of your IHSS social worker staff have completed the state-sponsored IHSS 101 and IHSS 102 trainings?
19. What percentage of veteran IHSS social worker staff have completed the state-sponsored IHSS Refresher Course 1 and 2?
20. Have all social workers conducting IHSS Unannounced Home Visits completed the Program Integrity Training, via the IHSS Training Academy?
21. What percentage of your IHSS social worker staff have completed all available state sponsored IHSS Trainings, via the IHSS Training Academy?



## Application and Intake Information

1. Please describe the county's current application/intake process.
2. How many applications are staff expected to process each month?
3. Does the county have an internal process to monitor pending application timeframes?

## Planned and Previous Actions

1. Describe actions the county has taken to address compliance during the last fiscal year and why these efforts have not resolved this issue. For each effort indicated, explain why these efforts were not successful.
2. Describe new actions the county plans to implement to ensure that IHSS applications are completed within the required timeframe during the period of July 1, 20##, to June 30, 20##, and how the county plans to maintain an **80 percent** compliance rate after that date.
3. Indicate how the county plans to monitor this QIAP to ensure that actions are completed, timelines are adhered to, and needed modifications to the QIAP are presented to the California Department of Social Services (CDSS) for approval in a timely manner.
4. Are there any IHSS resources that you think would assist the county with achieving compliance?

## QIAP Information

1. List names, titles, contact information, and roles of all county staff who will be required to: monitor the plan, report **timely** quarterly status updates to CDSS (via SOC 824), participate in any necessary conference calls with CDSS, and respond to CDSS inquiries regarding the QIAP. Please note that once approved, counties may use the approved QIAP to provide quarterly status updates (please highlight updated language).
2. Name and title of person submitting QIAP, and date submitted.

## Program Integrity Unit Contact Information:

The Program Integrity Unit (PIU) would like to remind counties to submit this QIAP Questionnaire and any updates to the information contained therein to the PIU inbox via email at [ihss-pi@dss.ca.gov](mailto:ihss-pi@dss.ca.gov).

## For CDSS Use Only:

- ☐ The QIAP is approved as submitted
- ☐ Additional information requested on:

Reviewer:

Date: