BEFORE THE
DEPARTMENT OF DEVELOPMENTAL SERVICES
STATE OF CALIFORNIA

In the Matter of:

CLAIMANT

and

ALTA CALIFORNIA REGIONAL CENTER, Service Agency

DDS No. CS0036075

OAH No. 2026050041

PROPOSED DECISION

Hearing Officer Christopher W. Dietrich, Administrative Law Judge, Office of Administrative Hearings, State of California, heard this matter on June 9, 2026, by videoconference from Sacramento, California.

Jordan Cody, Legal Services Manager, represented Alta California Regional Center (ACRC).

Claimant represented themselves.

Evidence was received and the record held open for receipt of additional documentary evidence from ACRC, but no additional evidence was received. The record was closed and the matter submitted for decision on June 9, 2026.

ISSUE

Is ACRC required to add homemaker services to Claimant's Self-Determination Program (SDP) individual budget and spending plan?

FACTUAL FINDINGS

Background and Jurisdictional Matters

1. Claimant is a 32-year-old ACRC consumer. Claimant identifies as nonbinary and uses they/them pronouns. They receive regional center services through the SDP based upon a qualifying diagnosis of Autism Spectrum Disorder (ASD). Their diagnosis causes disabilities in self-care, self-direction, capacity for independent living, and economic self-sufficiency. Claimant lives with their parents.

Request for Homemaker Services

2. Charity Burrows, ACRC Service Coordinator, testified at hearing. She has been Claimant's Service Coordinator since June 2024. Claimant began receiving services through the SDP in 2025. Claimant's initial SDP budget, covering the period from April 1, 2025, through March 31, 2026, allocated funds for Claimant to purchase various services, but did not include funds for them to purchase homemaker services. Claimant's SDP spending plan for the same period allocated $3,200 for Claimant to purchase homemaker services for "support with household deep cleaning to ensure a healthy living environment."

3. ACRC provided Claimant's Title 19 notes which document Claimant's interactions with ACRC and actions by ACRC staff regarding Claimant. On January 26,

2026, Claimant and Ms. Burrows met to discuss Claimant's Individual Program Plan (IPP) and SDP budget for the period between April 1, 2026, and March 31, 2027. Claimant requested that funds be added to their individual budget to purchase homemaker services. Following the meeting, Claimant and Ms. Burrows exchanged email messages regarding Claimant's second year SDP budget and spending plan. On February 24, 2026, an ACRC Client Services Manager informed Ms. Burrows that a cleaning service could not be included in Claimant's SDP budget or spending plan as this service was not related to their qualifying developmental disability.

4. ACRC informed Claimant of this determination on February 25, 2026. On the same date, Claimant sent Ms. Burrows an email explaining their need for homemaker services, stating the following:

> Support with housekeeping was previously approved, not for the budget but in my spending plan for the current year. The change in circumstances this year has to do with what natural supports I have available to me to support me in this area. It is related to my disability because this has to do with my mental and energy capacity. A neurotypical non-disabled person would be able to work and also keep up with housework, but I can only do one or the other because I am autistic and my capacity is limited by my disability.
>
> Additional funding was not included last year for this but I was able to meet the need by pulling from other funds. If funding cannot be added I would like to see what my budget total would come to see if it's possible to meet this need just in my spending plan.

(Grammar original.)

5. Ms. Burrows discussed Claimant's request with ACRC Client Services Manager Gianina Quiming, who agreed to discuss the request with ACRC's Associate Director. On March 4, 2026, Ms. Quiming sent an email to Claimant informing them that ACRC would not be able to include housecleaning services in their SDP budget. On March 17, 2026, Ms. Quiming sent an email to Claimant informing them that homemaker services could not be included in their spending plan. Ms. Quiming explained that Claimant had no assessed need for this service due to their high level of independence.

6. On April 1, 2026, a further IPP meeting was held between Claimant and Ms. Burrows. Following the meeting, Ms. Burrows prepared a written IPP setting forth goals for Claimant and identifying services and supports Claimant could purchase using SDP funds to achieve those goals. The IPP identifies goals for Claimant to continue to live with their family and to maintain good physical and mental health. The IPP documents that Claimant can independently complete all activities of daily living (ADLs) but may "become overwhelmed with household chores and selfcare." The IPP further reflects the following regarding Claimant's living arrangements and capacity to manage their ADLs:

> [Claimant] reports that their mother serves as [their] primary caregiver and is the primary cook in the household. [Claimant] eats separate dishes from the rest of the house, which increases the work their mother does for them. It was reported that [their mother] is out of the house for weeks at a time caring for another family member, leaving [their father] as the primary caregiver when [their mother] is

> gone. [Claimant] reports that [their] father is currently job hunting and healing from a broken finger, which makes it difficult for them to get support from their dad unless it is needed. [Claimant] reports that their parents serve as their caregiver in the areas of cooking, cleaning household, and completing laundry. [Claimant] also reports that they assist in these areas when they have the time to help out. [Claimant]'s parents assist with most transportation needs for [Claimant]. [Claimant] reports that their mother is disabled due to chronic pain and their father is disabled due to a broken finger. It was reported at the IPP meeting that [Claimant] has lived alone in the past but struggles to maintain work, personal life and home life while balancing a 50-hour work week, so they prefer to live with their parents to have more support and structure within their home. [Claimant] reports that cleaning and upkeep are doable for them but can be a lot of mental power due to them producing 40% of the income in the home and therefore cannot cut back on work to help as fluidly in other areas of the home.

(Grammar original.)

7. Claimant's IPP reflects that Claimant is authorized to receive $40,514 in services through the SDP for the period between April 1, 2026, and March 31, 2027. Claimant's service authorizations include 16 hours per month of one-to-one support

staff in their home and 15 hours per year of Independent Living Support (ILS) consultation for Claimant's support staff.

Notice of Action and Fair Hearing Request

8. On April 2, 2026, ACRC issued a Notice of Action (NOA) denying "[Claimant's] request to fund Homemaker/Personal Attendant services through [their SDP] individual budget, including any SDP spending plan that includes service code 313 Homemaker." On the same date, Claimant requested a fair hearing to contest ACRC's denial. In the NOA, ACRC explained its reason for the denial as follows:

> ACRC has determined that there is no assessed need for Homemaker/Personal Attendant services at this time. The available information does not demonstrate that the service is necessary to protect your health or safety or to maintain your current living arrangement. Because the service is not identified as necessary to meet an assessed need, it cannot be authorized[.]

(Grammar original.)

In the NOA, ACRC listed the following facts and laws in support of their proposed denial:

> [Welfare and Institutions Code section] 4648[, subdivision] (a)(1): Regional centers shall secure services and supports that are necessary to meet the needs of the consumer, as determined in the Individual Program Plan (IPP), and that support community living.

> [Welfare and Institutions Code section] 4646[, subdivision] (a): The IPP process is used to identify the consumer's needs and the services and supports necessary to meet those needs.
>
> [Welfare and Institutions Code section] 4646.5[, subdivision] (a)(1): The IPP must identify the consumer's goals and objectives and describe the services and supports to be provided to assist the consumer in achieving those goals and objectives, including those necessary to support health and safety and community living.

(Grammar original.)

Regional Center's Additional Evidence

DEPARTMENT OF DEVELOPMENTAL SERVICES DIRECTIVE AND SDP SERVICE DEFINITIONS

9. On November 25, 2025, the Department of Developmental Services (DDS) adopted a directive titled "Self-Determination Program: Initial Individual Budgets and Spending Plans" (D-2025-Self-Determination Program-003). The directive states, in pertinent part:

> An individual budget should be built to contain the amount of funding an individual will have to purchase services and supports needed to meet the individual's IPP goals. The amount of funding in an individual budget must be based upon services the regional center would have funded

through the traditional service delivery model to meet the individual's IPP goals. (Welf. & Inst. Code, § 4685.8, subd. (m)(1)(A)(ii)(II).)

[¶] . . . [¶]

Once the individual budget has been established, a spending plan must be created that identifies the specific services and supports that will be purchased using the individual budget.

[¶] . . . [¶]

The spending plan identifies the types of services and supports that will be purchased to meet the individual's IPP goals, for the services included in the individual budget. The services and supports that can be included in the spending plan are defined in SDP service definitions. The spending plan needs to include the services, how often the services will be purchased, the SDP service codes, and the cost of each service and support that will be purchased.

AB 143 requires regional centers to certify the individual's spending plan. As part of the certification process, regional centers must certify that the goods and services in the spending plan meet all the following:

• Address the goals in the individual's IPP.

• Are not available from generic services, including but not limited to, Medi-Cal, In-Home Supportive Services, services from other state departments such as the Department of Rehabilitation, and services provided by local school districts or private insurance.

• Are eligible for federal financial participation, which means the services or supports are eligible for federal funding and that the services have been approved by the federal Centers for Medicare and Medicaid Services.

10. Per DDS's SDP service definitions, the service category of Community Living Supports is defined, in relevant part, as follows:

> Community Living Supports are services that facilitate independence and promote community integration for participants, regardless of the community living arrangement. Services include support and assistance with socialization, personal skill development, community participation, recreation and leisure, and home and personal care, among others, as further described below.
>
> [¶] . . . [¶]
>
> Support with home and personal care includes services needed to maintain the home in a clean, sanitary and safe environment and provide essential care to the individual. Services include support with household activities, such as planning and preparing meals, money management

> (personal finances, planning, budgeting and decision making), and laundry. It also includes heavy household chores such as washing floors, windows and walls, securing loose rugs and tiles, moving heavy items or furniture in order to provide safe access and egress, as well as minor repairs such as those which could be completed by a handyman.
>
> [¶] . . . [¶]
>
> Services will be provided only in cases where neither the individual, nor anyone else in the household, is capable of performing or financially providing for them, and where no other relative, caregiver, landlord, community/volunteer agency, or third party payer is capable of or responsible for their provision.

(Grammar original.)

11. DDS SDP service definitions define the Homemaker service category as follows:

> Services consisting of general household activities (meal preparation and routine household care) provided by an individual that has the requisite skills to perform homemaker duties specified in the participant's IPP when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home.

(Grammar original.)

GIANINA QUIMING'S TESTIMONY

12. Ms. Quiming explained that the November 25, 2025 DDS directive placed restrictions on SDP spending plans. Per the directive, regional centers can only approve spending plans that include services that are necessary to implement a consumer's IPP goals. Before the directive was issued, a consumer could include services in their SDP spending plan without a regional center certifying that the service was necessary to implement the consumer's IPP.

13. ACRC reviewed Claimant's IPP, information submitted by Claimant, and information from Claimant's service providers to assess whether Claimant had a need for homemaker services. Based upon a review of available information, ACRC determined that Claimant did not have an assessed need for these services. ACRC determined that Claimant can complete homemaker tasks themselves. Further, ACRC determined that Claimant's request did not meet the criteria set forth in SDP service definitions for either community living supports or homemaker services. Claimant told Ms. Burrows that their mother is the primary person responsible for housekeeping tasks. Although Claimant's mother is repeatedly absent from the home for weeks at a time, ACRC determined that Claimant's father can complete housekeeping tasks in Claimant's mother's absence. As another adult capable of performing these tasks is always present in Claimant's home, ACRC determined that it could not approve Claimant's request.

CHARITY BURROWS'S TESTIMONY

14. Claimant's SDP budget and spending plan includes funds to purchase ILS. The ILS service is intended to assist Claimant in learning how to complete various ADLs

so that they can live with greater independence. Claimant's ILS provider provides incremental progress reports to ACRC regarding their progress in meeting their ILS training objectives. The most recent report that ACRC received, dated January 2024, indicates that Claimant is progressing towards their goals of (1) learning and perfecting family recipes; (2) mounting décor and posters on their bedroom wall; (3) trying new systems of organization for home and work; (4) identifying roadblocks to consistent chore completion; and (5) finding accommodating ways to complete chores that Claimant cannot do on their own.

Claimant's Additional Evidence

CLAIMANT'S TESTIMONY

15. Claimant is seeking to add funds to their SDP budget and spending plan to purchase recurring cleaning services for their home. Claimant works part time and attends school part time. Claimant is not under conservatorship. Claimant explained that their capacity to handle work, school, and household tasks is diminished because of their ASD. Claimant prepared a "self report" identifying their living support needs in various categories. Claimant documented their need for support with cooking as follows:

> For more than 15 years I have suffered from chronic gut issues, pain, discomfort, bloating, etc. In 2021 I was diagnosed with diverticulosis and occasionally suffer from acute flare ups (diverticulitis). The best support I have found for managing this and other chronic gut issues is eating smaller meals more often. I currently eat between 4 and 6 small meals per day.

I also have a history of gastritis related to missed or severely delayed meals.

My autism directly impacts my food choices in several ways:

• Difficulty sensing hunger cues

• Lack of appetite or interest in food

• Severe anxiety around new or unfamiliar foods

• Need for high degree of familiarity, sameness, consistency in foods

For general health and nutrition, as well as my ability to focus and be present in work and school, and my ability to engage in community activities and social recreation, I need to eat balanced meals. Left to my own devices, I gravitate toward easy carbohydrates like toast. However, if I do not have sufficient protein in my diet, I cannot focus on my tasks and responsibilities, I become lethargic, and feel ill or unwell.

Throughout my whole life, my mother has worked hard to ensure I get sufficient nutrition. As a child, when there was not food available that I wanted to eat, hunger would not win, I would simply go without eating. My mother still spends lots [of] time searching for recipes, trying them, and modifying them. In addition to cooking for herself and my dad, she cooks separate meals for me from the list of foods

that I will reliably eat. Over the years, we have increased the number of foods I can reliably eat, but my diet is still significantly restricted compared to a non-disabled, nonautistic person.

[¶] . . . [¶]

Due to my restricted diet and how difficult I find it to try new foods, I have always found it challenging to even think about trying to cook out of fear that it would not turn out well and I would be unable to eat it – therefore wasting food.

[¶] . . . [¶]

I have always found it difficult to help in the kitchen because I do not recognize when to jump in, don't pick up on cues, and need explicit instruction to participate. My mother who is not autistic moves quickly in the kitchen and although she has tried to teach me, she has struggled due to our very different ways of thinking and communicating.

I have some very basic cooking skills, including being able to safely use knives, ovens, stovetops, and kitchen appliances. However, I do not have a working understanding of cooking methods, seasoning, and task sequencing in the kitchen. I also find it difficult to juggle cooking multiple foods or doing multiple steps simultaneously and become overwhelmed easily.

> Cooking is also often a sensory challenge. I often cannot be in the same room when the blender is going, I am sensitive to heat, and I cannot stand for long periods of time without a significant amount of pain.
>
> Due to the high level of difficulty, the number of dishes that need to be prepared due to my specialized diet and mealtimes, and other obstacles such as limited cognitive [bandwidth], it would take me a great deal of time and energy for me to cook for myself what I need to eat in a given week even with instructional support (like ILS). If I did not have to work to earn a living I would gladly spend this time taking care of my basic needs and improving this skill, but I have to work to keep a roof over my head.

(Grammar original.)

16. In the self report, Claimant described their cleaning support needs as follows, in pertinent part:

> My disability means that there are no "simple tasks". Everything is a multi-step process, and there are many steps where I might get stuck due to:
>
> • executive functioning struggles
>
> • sensory challenges
>
> • decision fatigue

• limited awareness of what is needed

While this is a larger challenge in shared spaces such as the bathroom, living room, kitchen, and dining room, even in familiar spaces like my own room and [work desk] it is easy for me to get stuck not knowing where to begin or what order to do tasks in. When I get stuck, I get easily frustrated and may freeze or meltdown, particularly if other stressors are present or my overall stress level is high.

Beyond cleaning tasks, I also struggle with organization which often leads to items being strewn about, piling up easily on flat surfaces like tables, seats, and even on the floor. I have been working with my ILS worker to declutter my belongings – let go of items so I have less to organize – and next will be working on finding logical 'homes' for my belongings. The clutter currently is a huge obstacle to being able to regularly clean my personal spaces due to the added decision-fatigue and chance for triggering overwhelm.

(Grammar original.)

17. Homemaker services were added to Claimant's SDP spending plan in April 2025. In October 2025, a cleaning service began cleaning Claimant's home every four weeks. Claimant explained that the purpose of this service was to maintain the household at a baseline level of cleanliness, not to replace daily household cleaning. Claimant seeks to maintain this current service and frequency. Although Claimant

cannot prepare meals independently, they are not seeking homemaker services to meet this need.

18. Claimant argues that their 2026 IPP misstates their capacity to complete ADLs. They provided a copy of their 2025 IPP which states that they can complete "most" ADLs. However, this language was changed in their 2026 IPP to reflect that they can complete "all" ADLs. They believe the language was changed between IPPs to support ACRC's denial of homemaker services.

19. Claimant explained that they can perform cleaning tasks when their ILS worker is present. However, they become overwhelmed if they attempt to complete tasks without assistance. Additionally, Claimant suffers from recurring flareups of their digestive conditions. When this occurs, they do not have sufficient energy to work on their household maintenance and cooking skills with their ILS provider. When Claimant had the support of a cleaning service to help maintain the household, they had more opportunities to practice skills with their ILS provider.

20. Claimant lived independently in earlier stages of their life. During this time, Claimant routinely neglected their household chores. At one time, Claimant had piles of trash and cockroaches in their room. Claimant's physical and mental health suffered while they lived alone. Claimant's parents supported Claimant when they lived alone by bringing them meals and assisting with cleaning when they visited Claimant. Claimant's parents asked Claimant to move home so they could better attend to their needs. Claimant has lived with their parents since 2021.

21. Claimant's parents have provided support for Claimant for "cultural reasons" based upon their familial relationship. However, Claimant argues that their parents are not obligated to support them as Claimant is a non-conserved adult.

Additionally, their parents' capacity to provide support is diminishing. Claimant's mother has arthritis which causes recurring pain. In October 2025, Claimant's father injured his left hand at work and cannot grasp objects without dropping them. Claimant's parents' conditions limit their ability to complete household chores. Additionally, beginning in September 2025, Claimant's mother began traveling away from her home to care for her aging mother. Claimant's mother alternates staying at each location for three to four weeks at a time.

22. Claimant testified that they are not eligible for In-Home Supportive Services (IHSS) because they are not eligible for Medi-Cal. They produced an NOA from the Health and Welfare Agency showing that their Medi-Cal eligibility terminated in December 2025 due to Claimant's household income. Claimant previously applied for IHSS, but their application was denied.

CLAIMANT'S MOTHER'S TESTIMONY

23. Claimant was a "very picky eater" as a child. Claimant's mother did not know why Claimant struggled with food until they were diagnosed with ASD later in life. Claimant continues to experience eating challenges as an adult. Claimant does not always know what they like to eat and has an aversion to certain textures.

24. Claimant lived independently in their early adulthood. At that time, Claimant attended work but struggled to complete their ADLS and to tend to their personal hygiene. Claimant's parents supported them by bringing meals, cleaning, and helping with laundry.

25. Claimant's mother prepares most meals for herself, her husband, and Claimant. Although she will cook some common ingredients for all household members, she will prepare modified dishes for Claimant. She typically prepares five

meals per day for Claimant. At times, she will prepare two to three days' worth of food for Claimant to reheat. However, Claimant will not eat the same meal twice in one day. Claimant can prepare simple recipes but cannot prepare dishes requiring extensive time or multiple preparation steps. Claimant's father is able to prepare his own meals. However, he is not able to prepare meals that Claimant will eat.

26. Claimant's mother's capacity to complete household chores is diminishing. She is diagnosed with arthritis that causes pain in her hips and knees. She cannot lift heavy objects, and excessive activity aggravates her condition. Claimant's mother will travel for two to three weeks at a time to care for her elderly mother. She anticipates that she will continue to do so for the foreseeable future.

DOCUMENTARY EVIDENCE

27. Claimant was first found eligible for ACRC services in November 2022, at the age of 28. In assessing Claimant's eligibility, an evaluating psychologist noted that Claimant has "difficulty switching between activities" and that "problems of organization and planning hamper [their] independence." An ACRC intake specialist completed a social assessment. In the social assessment, they documented that Claimant was unable to complete certain household chores without step-by-step instruction.

28. Claimant's therapist wrote a letter in support of Claimant's request for housecleaning services. They have treated Claimant since 2022. They write, in pertinent part:

> [Claimant] experiences clinically significant difficulties in self-direction and independent living skills. [Claimant] has initiated significant accommodations for their ASD,

including being self-employed, working part-time, and cohabitating with their parents. However, [Claimant]'s bandwidth is still limited and has underdeveloped skills in areas such as cooking and housework, which is a fairly common presentation of ASD.

They are making progress in the areas of household tasks, that progress is slow and limited due to executive dysfunction, overwhelm, and limits in their capacity. [Claimant] recognizes that they are not currently capable of performing necessary household tasks, even with ILS support. [Claimant] relies on others to meet their basic needs (cooking and cleaning), but their support system is unavailable to help at this time. [Claimant]'s mother is caretaking for their grandmother, and their dad suffered a workplace injury (finger/hand). Both parents are disabled.

[Claimant] recognizes that they need support with visualizing each step of a task and support with building skills towards self direction. They would like the opportunity for direct instruction and a chance to practice skills. They have experienced great success with their current accommodations from the Regional Center, including an ILS coach and a personal trainer at the gym. Both of these interventions are examples of [Claimant] being taught a life skill, practicing with a professional, and becoming more independent in said task. While it takes time for them to

> develop these skills with direction, the current interventions prove that progress is possible.

(Grammar original.)

29. Aryn Anderson, Claimant's ILS provider, wrote a letter in support of Claimant's request for homemaker service. They summarize Claimant's need for homemaker services as follows:

> While [Claimant] has made progress in some areas, they continue to require substantial assistance and support to maintain a safe and sanitary living environment. My role focuses on teaching and developing skills. However, instruction alone does not ensure that necessary cleaning tasks will be completed consistently. Even with training and support they continue to experience limitations that prevent them from independently maintaining their home at level necessary for health and safety. [Claimant] is also working a full time job, attending their graduate school program, trying to maintain healthy relationships with family members and friends, going out into the community more frequently, working on a fitness routine, etc. Managing all these day-to-day tasks while trying to develop cleaning skills is going to take trial, error, and time. Although skill-building services are important and should continue, they do not eliminate the need for support with cleaning assistance. Without cleaning assistance, their home environment may [deteriorate] due to unfinished or

> neglected cleaning tasks. This puts [Claimant] at risk of dependence of [*sic*] emergency interventions and decline in overall quality of life and independence.

(Grammar original.)

Analysis

30. ACRC bears the burden of proving by a preponderance of the evidence that it is entitled to remove homemaker services from Claimant's SDP spending plan. Claimant bears the burden of proving by a preponderance of the evidence that ACRC is required to add homemaker or housecleaning services to their SDP budget.

31. The evidence established that, due to their ASD, Claimant struggles to complete household chores including meal preparation and household cleaning. However, housecleaning services are not necessary to implement Claimant's IPP goals for them to continue to live with their family and to maintain good physical and mental health. The evidence established that Claimant can complete household chores with the support of their ILS providers. Claimant does not have an assessed need for others to clean their home.

32. Additionally, Claimant did not establish that their request is consistent with DDS's directives and service definitions. Per DDS's service definitions, housecleaning services can only be purchased as Community Living Supports when "neither the individual, nor anyone else in the household, is capable of performing or financially providing for them." As discussed above, Claimant did not establish that they are incapable of performing housecleaning duties. Further, per DDS's service definitions, Homemaker services can only be purchased to complete "general household activities" that are specified in a consumer's IPP when "the individual

regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home." Claimant established that their mother, the individual regularly responsible for completing household tasks, is repeatedly absent from their home. However, Claimant's IPP does not indicate that Claimant needs another person to complete any specified household activity. The evidence at hearing did not establish otherwise.

33. Claimant did not establish that ACRC must include housecleaning services in Claimant's SDP budget. ACRC established that it may discontinue homemaker services in Claimant's SDP spending plan. Therefore, Claimant's appeal must be denied.

LEGAL CONCLUSIONS

1. The Lanterman Developmental Disabilities Services Act (Lanterman Act) governs this case. (Welf. & Inst. Code, § 4500 et seq.) An administrative fair hearing to determine the rights and obligations of the parties is available under the Lanterman Act. (Welf. & Inst. Code, §§ 4700–4716.)

Burden and Standard of Proof

2. Claimant has the burden of proving by a preponderance of the evidence that ACRC must add funds to Claimant's SDP budget to purchase housecleaning services. (*Lindsay v. San Diego Retirement Bd.* (1964) 231 Cal.App.2d 156, 161 [the party seeking government benefits has the burden of proving entitlement to such benefits]; Evid. Code, § 115 [the standard of proof is preponderance of the evidence, unless otherwise provided by law].) ACRC has the burden of proving by a preponderance of the evidence that it is entitled to terminate funding for homemaker

services in Claimant's SDP spending plan. (*In re Conservatorship of Hume* (2006) 140 Cal.App.4th 1385, 1388 [the law has "a built-in bias in favor of the status quo," and the party seeking to change the status quo has the burden "to present evidence sufficient to overcome the state of affairs that would exist if the court did nothing"]; Evid. Code, § 115.) Proof by a preponderance of the evidence means "more likely than not." (*Sandoval v. Bank of America* (2002) 94 Cal.App.4th 1378, 1387.)

Services and Supports for the Developmentally Disabled

3. Under the Lanterman Act, the State of California is responsible for providing individuals with developmental disabilities with the "treatment and habilitation services and supports" to enable such persons to live "in the least restrictive environment." (Welf. & Inst. Code, § 4502, subd. (b)(1).) To comply with this mandate the Department of Developmental Services contracts with nonprofit agencies called regional centers to provide services and supports for individuals with developmental disabilities. (Welf. & Inst. Code, § 4620.)

4. To determine what services a regional center consumer needs, regional centers are directed to conduct a planning process that results in an IPP designed to promote as normal a lifestyle as possible. (Welf. & Inst. Code, § 4646; *Assn. for Retarded Citizens v. Dept. of Developmental Services* (1985) 38 Cal.3d 384, 389.) The planning process includes "gathering information and conducting assessments to determine the life goals, capabilities and strengths, preferences, barriers, and concerns or problems of the [consumer]." (Welf. & Inst. Code, § 4646.5, subd. (a)(1).) The IPP must set forth goals and objectives for the consumer, provisions for acquiring services, contain a statement of time-limited objectives for improving the consumer's situation, and reflect the consumer's particular desires and preferences. (Welf. & Inst. Code, §§

4646, subd. (a)(1), (2), & (4), 4646.5, subd, (a)(2), 4512, subd. (b), & 4648, subd. (a)(6)(E).)

Self-Determination Program

5. The Self-Determination Program provides regional center consumers "an individual budget, increased flexibility and choice, and greater control over decisions, resources, and needed and desired services and supports to implement" a consumer's IPP. (Welf. & Inst. Code, § 4685.8, subd. (a).) Self-determination is designed to give the participant greater control over which services and supports best meet their IPP needs, goals, and objectives. (Welf. & Inst. Code, § 4685.8, subd. (b)(2)(B).) One goal of the SDP is to allow participants to innovate to achieve their goals more effectively. (*Id*. at § 4685.8, subd. (b)(2)(G).) DDS is empowered to implement program directives regarding the SDP. (Welf. & Inst. Code, § 4685.8, subd. (p)(2).)

6. "Self-determination" means "a voluntary delivery system consisting of a defined and comprehensive mix of services and supports, selected and directed by a participant through person-centered planning, in order to meet the objectives in their IPP." (Welf. & Inst. Code, § 4685.8, subd. (c)(6).) "Individual Budget" means the amount of regional center purchase-of-service funding available to the participant to purchase services and supports necessary to implement the IPP. (Welf. & Inst. Code, § 4685.8, subd. (c)(3).) The regional center can adjust the individual budget if it determines it is necessary due to a change in circumstances, needs, or resources that would result in an increase or decrease in purchase of service expenditures or if the IPP team identifies a prior unmet need that was not addressed in the IPP. (*Id*. at § 4685.8, subd. (m)(1)(A)(ii).)

7. The SDP requires participants to "only purchase services and supports necessary to implement their IPP." (Welf. & Inst. Code, § 4685.8, subd. (d)(3)(C).) The SDP requires a regional center, when developing the individual budget, to determine the services, supports and goods necessary for each consumer based on the needs and preferences of the consumer, and when appropriate, the consumer's family, the effectiveness of each option in meeting the goals specified in the IPP, and the cost effectiveness of each option. (Welf. & Inst. Code, § 4685.8, subd. (b)(2)(H)(i).)

Conclusion

8. Claimant is capable of completing household chores with the support of their SDP-funded ILS provider. Additional housecleaning services, whether authorized as Community Living Supports or Homemaker services, are not necessary to implement Claimant's IPP. Therefore, considering all the evidence, Claimant's appeal must be denied.

ORDER

Claimant's appeal from Alta California Regional Center's April 2, 2026 Notice of Action denying Claimant's request to fund Homemaker or Personal Attendant services through their SDP individual budget and SDP spending plan, is DENIED.

DATE: June 16, 2026

CHRISTOPHER W. DIETRICH
Administrative Law Judge
Office of Administrative Hearings

BEFORE THE
DEPARTMENT OF DEVELOPMENTAL SERVICES
STATE OF CALIFORNIA

In the Matter of:

Claimant

OAH Case No. 2026050041

Vs.

DECISION BY THE DIRECTOR

Alta California Regional Center

Respondent.

ORDER OF DECISION

On June 16, 2026, an Administrative Law Judge (ALJ) at the Office of Administrative Hearings (OAH) issued a Proposed Decision in this matter.

The Proposed Decision is adopted by the Department of Developmental Services. The Order of Decision, together with the Proposed Decision, constitute the Decision in this matter.

This is the final administrative Decision. Each party is bound by this Decision. Either party may request a reconsideration pursuant to Welfare and Institutions Code section 4712.5, subdivision (a)(1), within 15 days of receiving the Decision or appeal the Decision to a court of competent jurisdiction within 180 days of receiving the final Decision.

Attached is a fact sheet with information about what to do and expect after you receive this decision, and where to get help.

IT IS SO ORDERED on this day June 24, 2026.

Original Signed by
Katie Hornberger, Deputy Director
Division of Community Assistance and Resolutions