



Michelle Baass | Director

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NL: 04-0723

Index: Program Administration

TO: All County California Children's Services (CCS) Program
Administrators, Medical Directors/Consultants, and the Integrated
Systems of Care Division

SUBJECT: California Children's Services Program Training Requirements –
REVISED

Disclaimer:

This policy is considered optional at this time and will apply to County CCS Programs that choose to implement and participate in the CCS Program Monitoring and Oversight activities. County CCS Programs that participate in these activities may be eligible for related funding for the applicable state fiscal year.

If you choose to participate in the CCS Program Monitoring and Oversight provisions, please notify the CCS Program Monitoring and Oversight team at CCSMonitoring@dhcs.ca.gov and copy ISCDFiscal@dhcs.ca.gov.

I. PURPOSE

The purpose of this Numbered Letter (NL) is to provide training guidelines and requirements to California Children's Services (CCS) program counties and the Department of Health Care Services (DHCS) staff. This NL seeks to ensure CCS program staff are knowledgeable about the CCS program and competent staff maintain program compliance and the county's administration of high-quality CCS program initiatives as outlined in the California Advancing and Innovating Medi-Cal (CalAIM) initiative, Welfare and Institutions Code 14184.600 and Welfare and Institutions Code 141841.102(d).^{1, 2}

II. BACKGROUND

¹ [Welfare and Institutions Code 14184.600](#)

² [Welfare and Institutions Code 14184.102\(d\)](#)



Training is a key component to maintaining a consistent program that is run consistently throughout the state of CA, and to making sure staff are knowledgeable about the CCS program. Training is also critical to implementing CCS program compliance. DHCS is formally establishing training requirements and expectations for CCS program counties and DHCS staff as part of the CCS compliance program created under DHCS' CalAIM Compliance, Monitoring, and Oversight.

III. POLICY

All CCS programs, regardless of model type, must meet training requirements in order to ensure consistency among county CCS programs. DHCS will develop or lead trainings for county CCS program model types. This includes establishing the frequency of trainings that may include one-time and ongoing regular trainings as follows:

- Baseline onboarding for program regulation, laws and relevant technical training pertaining to electronic programs endorsed by DHCS.
- Regular review and updates to keep trainings up to date based on new laws, regulations, and program changes.
- Establish and maintain a CCS program training website to post training materials, recordings, and calendar for counties as trainings become available.
- Notify counties through a news flash or other electronic communication when DHCS uploads, updates, or offers new training content.
- Provide technical assistance and related trainings as needed upon county request or as determined necessary upon a county monitoring and survey findings.
- For DHCS led training, technical assistance offerings, and related convenings, DHCS will include managed care representatives and other CCS operational partners depending on the training subject matter. DHCS staff will also attend DHCS led trainings, in conjunction with county staff, with supplemental content or sessions tailored for DHCS' needs.
- Establish post training feedback surveys to assist in improving future trainings.

A. County CCS Program Requirements

All County CCS programs, regardless of model type, must support and ensure staff perform all required CCS program activities as outlined in the Memorandum of Understanding (MOU). County CCS programs will:

- Complete DHCS provided trainings as designated and shall supplement accordingly for local level operational needs.

- Provide diversity, equity, and inclusion training that includes but is not limited to unconscious bias, sexual orientation and gender identity and diversity vs. inclusion.
- Develop training policies and procedures and incorporate these requirements into local level training activities.
- Ensure staff receive comprehensive program orientation.
- Regularly review and update, as needed, county trainings for program changes and other needs at minimum biennially and as needed.
- Document that staff regularly reviews, updates, and completes training using the standard log templates provided by DHCS. DHCS may request training logs as needed, and they may be requested prior to or during a survey.

B. CCS Program Training Requirements

All CCS program counties and DHCS staff must complete training to support consistency, standardization, and compliance of the CCS program. In addition, DHCS will develop and establish various one-time and ongoing trainings for counties and DHCS staff.

Onboarding Training

All CCS program counties and DHCS staff must attend CCS program onboarding training established by DHCS. In addition, the county and/or DHCS will require CCS program executive level representatives to attend an onboarding training specifically related to their executive-level role. Regardless of classification, onboarding training must be completed within 180 days of a new appointment. Onboard trainings include, but are not limited to:

- Staff Onboarding
- Administrator Onboarding
- Medical Director Onboarding

Note: CCS program staff employed prior to the implementation of this numbered letter must complete all newly developed onboarding training by the second quarter after the implementation of MOU.

Technical Trainings

All CCS program staff who perform case management, program eligibility tasks, adjudication of service authorizations or appeals must attend technical trainings related to the CCS program at least once. Counties and/or DHCS are authorized to add new technical trainings in furtherance of the CCS program. Technical trainings may include, but are not limited to:

- Case Management System (CMS) Net
- Microsoft Business Intelligence (MSBI)

CCS Program Oversight Trainings

With the exception of CCS executive-level representatives (administrators, senior nursing, and medical directors), all CCS program staff must attend program oversight trainings in the interest of maintaining and advancing the county's administration of high-quality CCS program initiatives at least once. Counties and/or DHCS are authorized to establish additional training attendance requirements for CCS program staff based on CCS program operational needs. CCS program Oversight trainings may include, but are not limited to:

- Program Eligibility
- Program Plan and Budget
- Appeals

Specialty Staff Training Requirements

CCS Clinical Staff

CCS Clinical Staff must attend program trainings related to their roles and responsibilities in advancement of the CCS program at least once. Counties and/or DHCS are authorized to establish additional trainings attendance requirements for CCS program clinical staff based on CCS program operational needs. CCS clinical trainings may include, but are not limited to:

- Special Care Center Compliance
- Provider Electronic Data Interchange (PEDI) program
- Application Control Systems (ACS) Net
- Inter-County Transfers

CCS Medical Therapy Program (MTP) Staff

CCS Medical Therapy Program (MTP) staff must complete MTP required trainings as prescribed per DHCS related Number Letters (NL), Information Notices, reference guides, and policies as outlined on the Medical Therapy Program website.³ Examples of CCS MTP required trainings may include, but are not limited to:

- NL 09-0703 Durable Medical Equipment - Rehabilitation
- NL 07-0612 Episodic Treatment Model

³ [Medical Therapy Program](#)

- NL 02-0205 Functional Outcomes

DHCS Nurse Evaluators

DHCS Nurse Evaluators must attend program trainings related to their roles and responsibilities within the CCS program at least once. DHCS is authorized to establish additional training requirements for DHCS Nurse Evaluators based on CCS program operational needs. DHCS Nurse Evaluators trainings may include, but are not limited to:

- Adjudication of Service Authorization Request (SAR)

Whole Child Model (WCM)

All staff performing services related to the WCM are required to attend all WCM related trainings at least once. Welfare and Institutions Code 14094.12 specifies the services that all CCS staff must perform.⁴ Therefore, WCM trainings must be in adherence to Welfare and Institutions Code 14094.12. Counties and/or DHCS are authorized to establish additional training requirements based on the operational needs of the WCM. WCM counties staff training may include, but are not limited to:

- Whole Child Model 101 Training

All staff performing services for counties with independent status as prescribed by the Health and Safety Code 123850⁵ must attend training at least once. The Board of Supervisor, DHCS or the designated county department (department of health or department of social services) are authorized to establish additional training based on operational need. Independent counties staff training includes, but are not limited to:

- Adjudication of Service Authorization Request (SAR)

C. Continual Training Requirement

A minimum of twenty (20) hours of DHCS created and/or led trainings and/or supplemental local trainings according to operational needs must be completed, annually by all CCS program staff. DHCS defers to CCS program counties when choosing the DHCS created and/or led trainings and/or supplemental local trainings, unless required (e.g., onboarding), taken in advancement of the CCS program at the county level based on local county needs.

⁴ [Welfare and Institutions Code 14094.12](#)

⁵ [Health and Safety Code 123850](#)

DHCS created trainings are located on the CCS program training website at <https://www.dhcs.ca.gov/services/ccs/pages/ccs-training.aspx>. Training will be provided using various media types as well as in-person, on demand, and virtual. In addition to receiving notifications when training is available and/or modified, please check the website quarterly for updates.

D. Training Log Submission

County CCS programs must document, maintain, and submit completed training reports annually, and upon request to DHCS. Additionally, DHCS may request training logs as needed, and they may be requested prior to or during a survey. County CCS programs must document and submit all completed training to DHCS annually using the CCS program training log.

The CCS program training log must be submitted to DHCS via the existing Budget Portal with the other Annual Report submissions by August 15 every year.

IV. POLICY IMPLEMENTATION

This policy will be effective July 1, 2025, and will remain in effect until this NL is superseded or made obsolete.

If you have any questions regarding this Numbered Letter, please contact the CCS program by email to CCSProgram@dhcs.ca.gov and copy CCSMonitoring@dhcs.ca.gov.

Sincerely,

ORIGINAL SIGNED BY

Joseph Billingsley
Assistant Deputy Director for Integrated Systems
Health Care Delivery Systems
Department of Health Care Services