

Person-Centered Planning - Paper and Practice in California

Person-centered planning in California was written in law in 1992. That was the year that the Lanterman Act was amended to require that IPPs reflect a person's own preferences, strengths, culture, and vision for their life. To this day, individuals and families often report a difference between that promise and what happens.

This isn't a story about anyone doing a bad job. It's about regional center service coordinators who are stretched thin and doing their best inside a system that doesn't always make person-centered planning easy. It's also a story about a state that is actively working to change, and a commitment to the idea that a person's own voice belongs at the center of their plan.

“A person-centred plan is a means, not an end. The life that the person wants is the outcome, not the plan that describes it.” — Michael Smull, Essential Lifestyle Planning: A Handbook for Facilitators

What the Law Promises

The Lanterman Act is a legal requirement that requires an IPP to:

- Be built around what the person wants their life to look like — their “preferred future.”
- Reflect the person's strengths, preferences, lifestyle, and cultural background
- Be developed with the person actively participating
- Include the person's own goals for where they live, how they spend their time, and who they spend it with
- Be adjusted as the person's life and goals change

What Individuals and Families Report

The lived experience of individuals and families shows up in state oversight reports, legislative hearings, and advocacy materials.

Inconsistency from regional center to regional center

In 2023, the Little Hoover Commission released *A System in Distress: Caring for Californians with Developmental Disabilities*. Its central finding was that each of California's 21 regional centers has wide discretion deciding what services to offer. That can mean that two people with similar needs can end up with very different plans depending on where they happen to live.

Documented funding and service disparities

California's Legislative Analyst's Office has reported that, on average, Hispanic and Latino individuals receive about half the per-capita spending on services that White individuals receive. Disability Rights California, analyzing the same data, has documented this same roughly two-to-one gap.

Services identified, but not delivered

In January 2026, the Little Hoover Commission held a follow-up hearing to check on progress since its 2023 report. The testimony points out that an IPP can be person-centered on paper and still fail to be.

Where the Gap Actually Comes From

None of this means service coordinators are ignoring the law on purpose. The differences between the paper and the practice tends to come from several structural pressures:

What drives the gap	Why it happens
Caseload pressure	A thoughtful, person-centered conversation takes time. Heavy caseloads do not allow that to happen.
The pull of “what’s available”	Person-centered planning starts with what the person wants then developing a plan to get there. In practice, it's easier to start planning from matching what services already exist to individual goals.
Inconsistent training and culture	Person-centered facilitation is a real skill, and the quality of training varies by regional center and by individual coordinator.
Weak accountability for follow-through	Even a well-built IPP is only as good as what happens after the meeting. There has historically been little follow-up to make sure that a documented need turns into a delivered service.
Regional differences	The quality and consistency of person-centered planning varies depending on geography.

What's Actually Changing — and What Isn't Yet

Several reforms are underway to address these issues.

- A new standardized statewide IPP template took effect in January 2025, specifically built to be more person-centered and consistent across all 21 regional centers.
- DDS has published plain-language optional workbooks (“Your Plan,” “Your Child's Plan,” “Your Youth's Plan”) that people can fill out before a meeting, designed to help individuals show up with their own voice already organized.
- New Regional Center Performance Measures are being developed specifically to track “informational outreach” and the quality of person-centered services planning, not just whether a meeting happened.
- The Master Plan for Developmental Services explicitly names consistency and accountability as priorities, with the state required to report progress to the Legislature annually through 2036.

What hasn't yet been solved are caseload sizes, the consistency of training across 21 independently run organizations, and a reliable system for making sure that what gets written into a plan happens.

What This Means for Your Next IPP Meeting

- Remember that you are legally entitled to lead this process. If a meeting feels like it's being run for you rather than with you, you can say so and ask to slow down.
- If services are recommended that don't match what you said you wanted, you don't have to accept the plan as written. You can ask for changes.
- If something gets agreed to in a meeting but doesn't happen, you can complain in writing to your service coordinator.
- You can bring someone with you, bring written notes, and ask for a copy of your agreed upon IPP to review before you sign it.

A Final Word

The practice that a plan should start with a person's own life is the right one. However, it takes manageable caseloads, consistent training, and real accountability for follow-through to be successful.

“A quality plan is a promise to listen, a promise to act on what is heard, a promise to be honest, and a promise to keep discovering and honoring what's important to people.” — Michael Smull

The new statewide IPP template, plain-language workbooks, performance measures built around the person's own voice, and a state-level commitment to public accountability. These are the current steps toward a system where paper and practice match.