

CALIFORNIA DEPARTMENT OF CHILD SUPPORT SERVICES

P.O. Box 419064, Rancho Cordova, CA 95741-9064



March 28, 2001

LCSA LETTER NO: 01-06

TO: ALL IV-D DIRECTORS

SUBJECT: LCSA POLICY COORDINATORS

Reason for this Transmittal

- State Law or Regulation Change
- Federal Law or Regulation Change
- Court Order or Settlement Change
- Clarification requested by One or More Counties
- Initiated by DCSS

In our continuing effort to facilitate effective communication with Local Child Support Agencies and to be more responsive to policy inquiries, the Policy Branch of the Department of Child Support Services (DCSS) would like to establish a policy coordinator in each Local Child Support Agency (LCSA). We are requesting that you designate a person or persons from your existing staff who has knowledge in program and financial policies to act in this capacity.

We envision that the LCSA Policy Coordinator will be the primary contact with the Policy Branch on questions related to State Child Support regulations and/or policies. The Policy Coordinator will receive questions from county staff, conduct preliminary research, and forward any unresolved questions to the Policy Branch. We believe this process will allow the LCSA to gain insight into problem areas and provide this feedback to DCSS. This will also allow the Policy Branch to be more responsive to policy questions by having direct access to a designated policy contact in each county. Additionally, staff in the Policy Branch will have a central contact to obtain informal county input regarding the operational impact of a proposed policy direction.

All counties are requested to complete the attached survey form and mail this information no later than April 4, 2001, to the following address:

California Department of Child Support Services
Policy Branch
P.O. Box 419064, MS 30
Rancho Cordova, CA 95741-9064
Attention: Jodi Epperson

Alternatively, you may return this form by fax or email to :

Fax (916) 464-5057 or (916) 464-6061
E-Mail: Jodi.Epperson@dcss.ca.gov

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Please note the attached form includes two sections to name the Policy Coordinator. This is to accommodate those counties that due to size or functional organization may need to identify two coordinators. If you name two individuals for different policy areas, please name them individually and indicate which area each of them represents.

I would like to thank you in advance for your cooperation in helping us in this effort. If you have any questions or concerns regarding this matter, please contact Jodi Epperson for further information at (916) 464-5314.

Sincerely,

CURTIS HOWARD
Assistant Deputy Director
Child Support Services Division

Attachment

LCSA POLICY COORDINATOR(S)

County: _____

Policy Coordinator: _____

Title or Position: _____ E-mail Address: _____

Direct Phone Number: _____ Direct Fax Number: _____

Policy Area: * _____

Policy Coordinator: _____

Title or Position: _____ E-Mail Address: _____

Direct Phone Number: _____ Direct Fax Number: _____

Policy Area: * _____

LCSA Director: _____

Office Address: _____

Phone Number: _____

* Only applicable if naming more than one Policy Coordinator