

IHSS Public Authority Advisory Board Meeting
May 19, 2020
MINUTES

ZOOM VIRTUAL MEETING

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Meeting ID: 995 3828 4660 Password: Advisory

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Members Present via Virtual/Conf. Call: Janie Whiteford; Beverly Lozoff; Dennis Schneider;
Terri Possley (Ex-Officio); Mathew Lubinsky, Senon Hernandez; Lori Andersen

Members Absent: Bob Stroughter, Cheryl Hewitt

PA Staff Present via Virtual/Conf. Call: Edith Gong, Leticia Sabadin

Guests Present: N/A

Announcements & Public Comment: N/A

Update on the Change in By-Laws: Terri Possley stated that she had not been able to make much headway with County Counsel regarding the small change for quite a while. And since the shelter in place, she recently learned that her contact is no longer there and must start the process with a new contact at County Counsel. She will circle back and hope to have more information next month. Terri apologized for the delay and asked to keep this item on the agenda for next month.

Update on the MOU between IHSS & the Health Plans: Lori Andersen announced that the MOU was finally approved back in December 2019. Congratulations! Lori stated that there are no changes in terms of the relationship between Santa Clara Family Health Plan (SCFHP) and the County. Terri stated that everything is going well so far and following up on referrals to Social Workers is still a priority.

A scheduled training in Feb/Mar with IHSS Social Workers and SCFHP had to be cancelled due COVID 19. The organizations are looking to do training on Zoom or another virtual platform.

Lori agreed to be a guest speaker at Terri's next all staff meeting in June or July.

Approval of Minutes: Motion by Beverly Lozoff to approve the January 21, 2020 meeting minutes as written, seconded by Janie Whiteford, vote was unanimous.

PROGRAMS REPORT

Edith presented Program highlights from the written report. This was presented before the CAPA report.

- Janie asked about the actual amount of PPE distributed. Edith mentioned only 3 kits from the state have been distributed since the guidelines are so strict.

Benefits Administration: There are **12,393** IPs enrolled in the Valley Health Plan with **4,268** of those in the Classic Plan and **8,125** in the Preferred Plan during April. There **13,066** IPs enrolled in the Dental/Vision plans. There were **66** Smart Pass VTA Cards issued during April.

Enrollment:

Number of IPs enrolled: **412**

Number of IPs partially done: **502**

Fingerprints failed to date: **15**

Group sessions were suspended after the COVID-19 shelter-in-place orders were in-acted.

Registry Services: The Registry is fully functioning with referral lists being given over the phone, emailed or in some instances mailed. As staff are interacting with consumers and providers check-ins are done to ensure needs are being met and referrals made when appropriate. There are **382** active IPs on the registry and **1,379** active consumers.

The Registry:

- Completed **59** new consumer intakes and reactivated **25** consumers
- Attained **30** matches
- Provided **711** new interventions
- IPs using the new automated monthly check-in: **159**

Care Coaching: The Registry received **12** referrals for Care Coaching in the month of April.

- There were **zero** in-home visits made. In-home visits were suspended after the COVID-19 shelter-in-place orders were in-acted. All Care Coaching is being conducted over the phone until further notice.
- Total active consumers **48**
- Total inactive consumers **252**

Urgent Care Registry There were **0** hours of urgent care services authorized in April.

Emergency Backup Registry: Due to COVID-19 the state issued a requirement for all Public Authorities to establish an emergency backup system. PA by Sourcewise quickly developed the EBR to fill in on short notice when requests to send a provider to a consumer who has COVID, been exposed or is in quarantine. So far only 1 consumer has accessed the EBR and is currently being served through it. Providers who work EBR receive a \$2 pay-differential above the current wage, in SCC makes it \$16.62/hour.

Registry Introductory Training (RIT): The RIT's were quickly transformed due to the shelter-in-place order to enable bringing on new providers to meet the need. **Two** RITs were held in April remotely using MS Teams.

- Conducted **12** interviews
- Called **24** references
- Completed **19** reference checks
- Added **4** providers to the registry in April.

IP Trainings Provided: IP Trainings Provided: There were **no** training classes held in April due to the shelter-in-place order.

PPE from the State was received Monday, April 27 for distribution to IHSS providers restricted to those working for a consumer who either has COVID-19 or been exposed and is quarantine. The restrictions for dispersing this important resource is preventing many providers from obtaining the necessary protective supplies needed. Unfortunately, the PA did not receive the full supply of PPE that was supposed to be delivered and a large portion of the masks are old, from 2003 and the elastic breaks when attempting to put it on. This is an issue for many Public Authorities across the state. CAPA is working to see if/how this can be remedied.

The Public Authority reached out, with the assistance of IHSS Program Manager, Terri Possley to the local EOC office to obtain a separate supply of PPE for IHSS providers. This is being distributed by appointment in order to maintain safe personal distancing.

Postcard was mailed to all 26,855 providers in Santa Clara County advising them on proper precautions during the pandemic. Important COVID-19 information and Protective Equipment educational videos can be accessed by using the link on the PA website:
<http://www.pascc.org/services/covid19.html>

Consumer Connection Newsletter was out in March to 26,100 individuals. A copy of the training newsletter can be found on the Public Authority website at this link:
<http://www.pascc.org/resources/newsletter.html>

Electronic Time Sheets: Santa Clara County has **79.8 %** of IPs and consumers are enrolled in electronic timesheets.

Direct Deposit: enrollment has increased participation rate to **52.3 %** ensuring IPs get paid much quicker. PA staff is encouraging new IPs and others they talk with to enroll in ETS and DD in order to prevent delays in getting paid. It is included as part of the enrollment orientation as well. CDSS now publishes a monthly Excel report of statistics that includes county data and statewide comparisons:
<http://www.cdss.ca.gov/inforesources/IHSS/Program-Data>

Sick Leave Update: A total of **25,770** active IPs have accrued 8 hours of sick leave, **3,199 (12.4%)** of them have claimed some hours, **2,930** have claimed all 8 hours so far, this fiscal year.

CAPA REPORT

Edith highlighted the May Revise of the Governor's budget that was announced on May 15th and the proposed items that affect PA Admin and IHSS. This information is all mentioned in the legislative portion of the CAPA report below.

- Dennis asked about paper timesheets and IHSS mailing them out even though Electronic Timesheets are in effect. Edith replied that paper timesheets will continue to be sent out to IPs until end of year when all IPs and Consumers must be enrolled in electronic timesheets.

- Dennis also asked about the PPE to providers. He wanted clarification on how to go about obtaining masks and gloves. Edith replied that the distribution is being done through Shannin Prather. IPs call the Training line and appointments are made to pick up PPE.
- Lori believes that cuts to CBAS and MSSP will impact health plan members. Clients will end up in a nursing home and/or need for more IHSS hours. Is it that being discussed? Edith agreed and stated that multiple safety net programs are looking to be cut and that will have an effect on the IHSS population. Everyone is advocating to keep their programs in place. Terri stated that they are not sure how this will work out in the future. Terri did note that IHSS intakes and referrals are lower than normal, and feels it has to do with the SIP. Consumers are not going to their doctor appointments, getting medically certified to be on IHSS. This trend started after the shelter in place.
- Janie asked a question to Terri with regards to the IHSS payroll tasks shifting from county to State level and what, if any, ramifications does she see. Terri commented that at this time, it is too soon to tell, but any cuts to staff may affect consumers and providers. They will still be serviced, but if some payroll tasks are moved the State, IHSS will still get calls, but the workload will be higher for County payroll staff.

CAPA began holding weekly COVID-19 update virtual meetings starting March 19th. The next full Board Meeting (virtual) is scheduled for May 26.

Emergency Backup Registry: In response to the COVID-19 crisis, the state identified a potential critical need for an emergency back-up system of IHSS providers to ensure that IHSS recipients continue to receive their services during pandemic conditions. The state has extended emergency pay differential through the end of the calendar year – 12/31/20.

Emergency Paid Sick Leave: Due to COVID 19, a one-time paid sick leave benefit is available to providers who cannot work because of exposure to COVID 19, self-quarantine or caring for children or another person at home. The benefit provides up to 80 hours for full time IPs who work 160 hours or more. For those working less than 160 hours, the pay is the average hours worked over a two-week period based on the previous six months. A claim must be filed by 12/31/20.

Personal Protection Equipment (PPE): The Governor announced the State will provide masks and gloves for IHSS providers. The state allocated 250,000 masks & 250,000 pairs of gloves for IHSS providers. The amount will be prorated out to each PA on the active number of providers in their county. PAs are receiving the PPE and given responsibility to distribute according to state guidelines.

Recognizing there are over 500,000 Providers in the State, not everyone will be able to receive PPE. This equipment will be restricted to certain guidelines: CDPH CRITERIA FOR PERSONS TAKING CARE OF INDIVIDUALS WITH SUSPECTED OR CONFIRMED COVID-19 IN NON-HEALTH CARE SETTINGS: IHSS providers need PPE when they perform direct patient care at home or other non-healthcare settings and have prolonged, close direct contact with recipients with possible or confirmed COVID-19 infection or their bodily fluids. The CDPH's guidance can be found at the following link:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID19/UseofPersonalProtectiveEquipmentduringCOVID19.aspx>

CAPA and CSAC are working diligently to get the restrictions eased so that more PPE can be distributed to a wider number of providers.

IHSS Enrollment Activities: The State issued a letter temporarily waiving orientation and individuals will need to complete it within 90 days of the Shelter-in-Place order. Many Public Authorities have found methods to continue enrollment for new IHSS providers and maintain integrity of the process and conduct the necessary requirements using electronic methods.

A large issue has been Live Scan operators have been closing due to inability to maintain the social distancing required. For locations where LiveScan operators are no longer operating, the state is allowing an alternate method of doing a preliminary background check (name check) that only requires a form to be completed and signed. However, providers must still perform the LiveScan by Sept 30, 2020.

EVV/ETS: CDSS has indicated the implementation of electronic time sheets will proceed as scheduled even in light of the COVID-19 shelter-in place order. Santa Clara is scheduled to be part of waive 3 scheduled for May/June 2020 implementation. Since EVV is a Federal mandate the state is required to press forward unless there is a waiver by the Feds. In addition, CMS has challenged the implementation of EVV and is requiring additional changes be made to include GPS location information. The state's plan was vetted and agreed to prior to implementation, so CDSS has urged CMS to accept the current implementation. If not, then CDSS is requesting additional funds and time (2023) to make revised changes to the EVV.

CDSS is working on minor changes to EVV for those consumers who have live-in providers, so they don't have to complete the start, end and location fields for EVV. The plan is to have those implemented by Fall 2020.

Legislative Report: The legislature has recessed until May 4th. There haven't been any hearings since March 11th. The leadership has advised it's likely the only bills likely to move this year will be on the budget, PSPS, homelessness and COVID-19. There are a lot of unanswered questions about how the legislature will operate when they return. CAPA's Executive Director, is a member of the Institute of Governmental Advocates and they sent the attached letter to leadership last week. No response yet.

The Governor's May Budget Revision has budget cuts across the board given the global recession and projected deficit of \$53.4 billion, however Public Authority and county IHSS admin funding look safe for the moment but will remain at 19-20 funding levels for FY20-21.

A summary of the proposed cuts that could affect IHSS include:

- 1991 and 2011 realignment – 7% cuts would be in effect starting January 2021
- Many IHSS Payroll activities shift from the County to the State, resulting in the need for less payroll staff, with continued automation through ETS/EVV.
- IHSS Residual Program would confirm with the timing of Medi-Cal coverage. IHSS and Medi-Cal reauthorization would be synchronized.

CAPA, CSAC, Public Health and Social Services advocates were present at the Budget Assembly Hearing on Monday, May 18 and all formally opposed the 7% cuts and cuts to CMIPS payroll staff.

California IHSS Consumer Alliance Report (CICA): Janie Whiteford reminded everyone about the monthly call scheduled for May 20th and urged everyone to try to call in and participate. There will be 2 guest speakers:

- Karen Keesler will be discussing the budget and how it affects IHSS and Consumers
- L.A. County rep will be discussing PPE usage and how to protect yourself at pome

Janie also reported that CICA's executive committee is re-evaluating what CICA does. CICA needs to revisit their original mission of advocating and educating advisory committees and inform them in doing what they have been mandated to do with Public Authorities. Their primary focus is developing training modules for the PA's. CICA wants to be able to deliver these trainings via ZOOM or another virtual platform. Janie is reaching out to all 28 county members to gather input. Janie reported there are a lot of advisory committees that are nonfunctioning and directors are not aware of what an advisory committee does or represents.

Beverly said that the history of IHSS, CICA and CAPA is important and should be highlighted in these trainings. Janie asked all AB members to please give ideas and feedback as to what they would like to be trained on, what types of training sessions they would like to see offered.

The CICA Centralized Regional Meeting is postponed due to COVID-19. They do not expect anything to happen until January 2021.

Edith mentioned the possibility of using the AB's budget for virtual meetings to help train advisory committees.

Report from Social Services Agency: Terri Possley reported that her staff are working remotely since the SIP order on March 16. The IHSS lobby is closed and signs were posted to encourage signing up for electronic timesheets. The IHSS staff are able to receive live calls while working remotely, so very few voicemails are left. Some staff are working in the office as necessary to pick up paperwork.

Phone intakes and annual re-assessments began around March 6th, partly because there was no PPE available at that time. Annual re-assessments can be done on the phone. Phone intakes need to be done via Skype or Zoom so the social workers can review the home environment.

The pandemic is putting further pressure on the IHSS budget. However, because social workers no longer have travel time to/from the office, then out to do home visits, they have seen efficiencies in several areas: voicemail call volume, regular call volume and compliance with the State. Janie asked if working remotely will be part of the "new normal". Terri mentioned that this may be the case after the shelter in place is lifted. They will have to re-assess the situation and make decisions accordingly. The entire leadership team are starting to prepare for what a return to office will look like, but tele-commuting is definitely a major consideration.

Dennis stated the effects of working from home is positive as seen and heard from the big companies alike.

Harvey Rose Audit

Terri was given an 89-page draft recommendation along with the DOS Director, other Directors and IT. Terri was unable to share any of the content as it is a draft document and confidential. She hopes to share more information at the June AB meeting.

There was also mention of a separate, CQI (Continuous Quality Improvement) project. Chad Whitlock, Program Manager for CQI is still working on the project which stalled due to COVID-19. Terri is having on-going meetings with him and others to review what the county dashboard looks like with certain key metrics that can be seen at a glance.

The IHSS lobby is getting technology upgrades to minimize lines once the lobby re-opens. They are looking to implement a kiosk where a number is given upon entering and the number will be shown above the window once the staff member is available.

Mathew asked Terri about the phone/electronic visits by Social Workers; will this continue post-crisis. At this time annual home visits and intakes are being done via phone call. Once the shelter-in-place is lifted, Social Workers will return to home visits, but only if PPE is available and supplied to the IHSS staff. Safety for all involved is a must for to protect consumers **and** the social workers.

Janie asked Terri to share the Harvey Rose Audit recommendations as soon as possible if allowed; Terri agreed.

Janie stated that there are three vacant seats on the Advisory Board at this time and that we need to recruit more members (2 consumer vacancy seats, and 1 Union seat).

Next Meeting: The next meeting of the Advisory Board is **Tuesday, June 16, 2020 from 12 noon to 1:30 pm** via ZOOM Virtual/Conference call.

Agenda items:

Per Terri, update on the Change in By-Laws and the update on the Harvey Rose Audit.