



# **IHSS Stakeholder Advisory Committee**

**October 21, 2015 / 10:30 am-3:30 pm**

Department of Rehabilitation  
721 Capitol Mall, Room 169  
Sacramento, CA 95814

**Conference Line:** 1-888-278-0296

**Participant Code:** 3591220

## ***Objectives:***

1. Develop a shared understanding of the IHSS Program and scope of responsibility for the In-Home Supportive Services (IHSS) Stakeholder Advisory Committee (SAC).
2. Gain agreement on operational guidelines that will serve as a foundation for the SAC's work.
3. Identify potential agenda items for future meetings.

## **Agenda**

<b>10:30 am</b>	<b>Welcome, Agenda Review, and Introductions</b> <ul style="list-style-type: none"> <li>▪ Name, role, affiliation</li> <li>▪ What do you appreciate the most about the IHSS Program?</li> </ul>	<b>Lori Clarke</b> <i>Facilitator</i>
	<b>Opening Remarks</b> <ul style="list-style-type: none"> <li>▪ Role of SAC</li>   <li>▪ Overview of Bagley-Keene Open Meeting Act</li> </ul>	<b>Karol Swartzlander</b> <i>IHSS Statewide Authority</i>  <b>Mark Sumner</b> <i>Department of Managed Health Care</i>

	<b>IHSS Program Overview and Emerging Topics</b>	<b>Eileen Carroll, Hafida Habek</b> <i>Department of Social Services</i>
	<b>Public Comment:</b> <ol style="list-style-type: none"> <li>1. Please state your name</li> <li>2. Share your role, affiliation and county</li> <li>3. Kindly limit comments to 1 minute</li> <li>4. Allow everyone to make a first comment before making a second comment</li> </ol>	<b>Facilitated by Lori Clark</b>
	<b>Lunch</b>	
	<b>Operational Guidelines/Charter</b> <ol style="list-style-type: none"> <li>1. Vision</li> <li>2. Mission</li> <li>3. Values</li> <li>4. Goals</li> <li>5. Rules of Operation/Procedures</li> </ol>	<b>All</b>
	<b>Agenda Items for Future Meetings</b> <ul style="list-style-type: none"> <li>▪ Based on the purpose of the SAC, what are the priority topics you would like to discuss?</li> </ul>	<b>Discussion led by Lori Clarke</b>
	<b>Public Comment:</b> <ol style="list-style-type: none"> <li>1. Please state your name</li> <li>2. Share your role, affiliation and county</li> <li>3. Kindly limit comments to 1 minute</li> <li>4. Allow everyone to make a first comment before making a second comment</li> </ol>	<b>Facilitated by Lori Clark</b>
<b>3:30 pm</b>	<b>Wrap Up and Adjourn</b>	

### **Accommodation Requests**

Any person who wishes to request this notice or other meeting materials in an alternative format, requires translation services, or needs any disability-related modification or accommodation, including auxiliary aids or services which would enable that person to participate at the meeting, must make that request at least five (5) days prior to the meeting date to Gerry Andrus at (916) 651-6764 or [Gerry.Andrus@dss.ca.gov](mailto:Gerry.Andrus@dss.ca.gov).