

California IHSS Consumer Alliance
Statewide Call
June 15, 2016

Notes

Roll: Charlie Bean, Heidi Aharonian - Orange, Lena Berlove - Orange, Bonnie Newman - Calaveras, Michele Geving – San Diego, Joe Samora - Sacramento, Felicia Connelly - Riverside, Margareta Jorgenson - Orange, Louise Osejo - Mendocino, Shannon of Santa Clara, Janie Whiteford – Santa Clara, Rick Simonson - Sacramento, Randi Bardeaux - PASC, Kristine Loomis - Riverside, Sharon Matson, Gloria Gerber - Napa, Todd Metcalf - Lake, Rosita Whitaker, William Reed - Placer, Greg Thompson - PASC, Janet Canterbury - PASC, Karen Keesler - CAPA, Sheree Wind - Riverside, Dave Begone (?) - Shasta,

Sharing: [County Newsletters](#): If the county you live publishes a newsletter forward to Charlie at info@cicaihss.org to share with other counties.

Part of sharing newsletters and other county policy papers is to share “Best Practices” one county may use in accomplishing various tasks within the IHSS program. It is hoped to create a list of “Best Practices” that can be used throughout the 52 Counties of the State (the practice could be modified to fit the county – meant to be a template).

If you know of a Newsletter or County policy just let Charlie know if you cannot mail it and he will request it.

Karen Keesler, Executive Director, CAPA: Two important items in the State budget is in regards to the 7% cuts and FLSA.

But first want to share the IHSS Coalition had written a letter requesting the restoration of the IHSS Share of Cost Buy-out.

From the letter: *“The 2009 repeal of the IHSS share of cost buy-out*

left some IHSS consumers, who have income above the SSI amount (currently \$889.40 for an individual) with substantially less than the inadequate SSI level income to live on. To receive IHSS, they must spend down to \$600 - the Medically Needy amount.

Having only \$600 to live on leaves these consumers at more risk for institutionalization, and makes it more difficult if not impossible for some people to leave nursing homes, faced with the prospect of living on \$600 a month.”

The IHSS Coalition could not get data from the state to show what it would cost and how many would need this. Without the numbers they could not get traction from any of our representatives, thus this is still being worked on and planned to be submitted as part of next year's budget (2017-18).

The 7% reinstatement of cuts has been repealed, tied to the Managed Care Organization (MOC) tax. The life of this is 3-years, so at the end of 3-years this could be up for discussion unless other funding sources are funding.

The FLSA Act there has been great support for simplifying this from the IHSS Coalition membership (CAPA, Unions, DRC, and etc.). But it is also a political game as well, and the State has stated there are low numbers vs what the Coalition has stated they foresee larger problems in the future. Paring the request submitted to the bare bones ([example of letter showing minimum request](#)).

They asked for the grace period be extended three months, asked for a due process for the exemption process so there would be an appeals process after the county did its part, asked for longer time period for counties to review the violation process extending the mailing time period, and a couple other things.

Where successful in getting both houses budget committees to agree to the proposals. In the time between the budget hearing and getting to the floor things changed.

The violations was extended in May because there was confusion

about rules not being understood. Then in June it was found that the confusion and questions were still in place so no violations to be scored in June.

During a CAPA meeting they gave some numbers reporting violations were at 25,000 in February and in June reported to the Senate they dropped significantly (about 11,000 in March and 4,600 in April, reported in CAPA meeting of May.). Overall the State is reporting number of errors have dropped significantly. No report was submitted for May or June. It was almost like the Legislation understood the problems.

The FLSA recommendations did not go past the Pro Tem and Governor discussion in the budget compromises. The Legislation did not work hard on the FLSA but more on the CalWorks program. Thus FLSA will need to be on the list of things to be worked on through the year and change for next year's budget. In the meantime, it is important to identify problems from the consumer and providers and work through them the best we can administratively and have a stronger budget proposal for next year's budget hearings.

Kristine from Riverside: Lack of a state or administration review is disappointing!

Greg Thompson, Executive Director, PASC: The PASC have been trying to get the appropriate information to consumers and providers in an understood format.

As we all know there are a lot of changes happening with the IHSS program and what was seen many of these decision are being make with little input from those the program affects. Yes, there is a small group of advocates, very good ones who can travel to Sacramento, but PASC is looking to improve gathering and sharing information to and from those under the IHSS program. The need for consumer outreach was seen as something needed.

Getting information out to people and sharing information about the changes within the IHSS program. Wanted to create an avenue of

more input from those affected.

While meeting with Holly Mitchell of the Assembly about three years ago the conversation lead to how to hold town hall meetings, hoping to get a speaker to draw people to the meeting and speak on a particular subject. Ms. Mitchell mentioned the use of Tele-Town Hall calls as a tool for holding meetings.

PASC started using the Tele-Town Hall contacting possibly 40,000 people about an upcoming informational meeting. How it works, is about three days prior to the meeting a robo-call goes out to those on our list announcing the subject and other information. A number to call and passcode is given and all the individual needs to do is call it and state their name, much like how the CICA call is done.

Cost of getting information out and back is important looking for a cost effective venue for getting information out is important. If you are mailing information out it could cost \$.50 per letter with little return. By using the Tele-Town Hall phone application much greater participation has happened.

An example of one call 39,700 numbers were dialed with a peak attendance of 2,600 answering the call with an average of 22 minutes staying on the call. This particular call we used a poll question: "My provider and I submitted the SOC 846 already?" Great response with a high response for "Yes, I have mailed it in (46)" or "No, I haven't mailed it in (13%)" or like "40% of responses did not know what this was."

We try to call people about what the issue is about, especially those most affected, depending on the issue, both consumers and providers could be called. We have also provided training over the tele-town hall on how to complete your timesheet. Gave information they needed and allowed individuals to share what they did. On a particular call we had 25 people contribute to the call through comments and questions. We also screen 56 calls, while on the call you hit star 3 and you can talk to one of our staff and get your questions answered directly. At the end of the call the caller can leave a message and they are usually contacted afterwards.

Messages can be left during the call and afterwards. Follow-up calls are done and the mentors we have often do this (Janet can explain this more).

Kristine: Can you give us actual cost, per person?

Response: The costs usually run between \$3,000 to \$5,000 per call, \$.15 per caller.

Will be doing a survey in the coming week and this will be done using the telephone; pick 500 numbers and call them.

Kristine: Where do it get the numbers?

Response: Numbers we use are from our registry, local groups we work with. We hope to expand our list to state-wide. Developing a list is labor intensive like there is a need to identify if the number is a land line or cell phone.

In hoping to expand this state-wide individuals on this CICA call can share our information and as individuals call in we can do the follow-up if they want to be on our tele-town hall list for future calls; this is done 4 times a year.

The invitation to have others participate is great, especially for smaller counties without the resources.

Training: We have had to focus on various trainings. Orientation training for those who wish to be on the registry are trained for consumer Provider relationships, completing time-cards, and etc.

PASC has 8 mentors who are involved in several avenues of the IHSS program working at local homes, involved as members of support groups. They helped in the transition to the CCI for many. We look to provide training through other media sources and record meetings.

Lena: Interested in the next call about Cal Optica and asked about having a webinar to provide a group workshop between the five

counties in the south. Traveling for disabled and seniors is difficult so looking for other ways to present information.

Response: Anything is possible. Very into collaboration and look forward to working with you about future webinars and so forth. Would love to talk more about this!

Janie: How did you start the peer program? Are the peer mentors getting paid?

Response: Yes, some are paid. There is a concern for these individuals because of the amount of money they could earn being on SSI.

There is also another group we call the Consumer group, which there are about 80 people in this group – Janet would be the one to explain this better. Having mentors is very important sharing information and training on different skills; a true mentor can share more than their personal experience, but answer with information individuals can use (it is important to recognize everyone is different and your experience may not apply). The ideal goal would be less dependence on others and more self-supportive from the people being worked with on how to get through the politics and get the services needed.

Janie: How are mentors used, hooked up with individuals, do they go out into the community, etc.?

Response: All of the above. They teach our TIP Classes, provide information on our health plans, and each time a tele-town hall we get calls they respond to them. They do legislative training visiting local legislative offices.

Kristine: Do you train on the hiring, firing and etc. between the consumer and provider?

Response: Yes, to the extent we legally can. These are subjects often included in our TIPs classes. Tips on how to write ads and etc. The mentors will lead callers to appropriate people to deal with

trouble they have with their consumer or provider.

Randi: As a part of Janet's Consumer Core, we have had meetings on the CCI, and other issues holding meetings pertaining to IHSS issues.

Janet: Level of training given to mentors varies. It depends on the interests of the mentors. Then holding meetings lead by the mentors discussing specific issues. Mentors are asked to not dominate the conversations, but to encourage participants to discuss the issue, especially to get the consumers' view of problems they are having.

Janie: How did you get these mentors?

Response: Mentors are picked through contacts, developing individuals who show an interest in IHSS and they are later contacted and a relationship is developed.

During the town hall meetings it is announced and folks are asked to push *3 if they are interested in more information and so forth. Messages left are returned within the next week weeks. Needs to be noted there are those who are very active in the mentor program and then there is a second list of other just interested and want to be notified of the different meetings.

An example of the Consumer Core list use they are sent an email asking them to contact the governor about the budget. After they contact the governor's office they need to respond to the email and share they contacted the governor's office and explain what happened. Those who do this are contacted in the future and nurtured into doing more of they like, such as becoming peer mentors, being more active.

Janie: Is there any financial enumeration for these folks?

Response: No, I wish, but No.

Kristine: Have you talked to other counties about this program?

Response: Honestly, SF has a mentor program and is very structured. Ours is organically growing and is changing all the time. SF it is believed can pay some.

Media requests during the overtime roll-out was a new challenge and training mentors to discuss subjects with the media and connect.

Little meetings are held at senior buildings and the groups grow. They look in and hold conversations on anything, which includes topics about Obama to IHSS. Training is provided to mentors on facilitating meetings.

Starting small seems to be the best way to begin. A session led by a consumer is a good start and those who attend may step up to lead in other workshops or meetings for sharing information.

To get the recording [click here!](#) My notes are highlights!