

PASC Board Meeting Monday, October 4, 2021 Minutes

1. Call to order: The Personal Assistance Services Council (PASC) Board Meeting was called to order at 1:05pm.

Donna Fields called the roll: Wilma Ballew, Jorge Chuc, Steven Echor, Donna Fields, Lyn Goldfarb, Janet Heinritz-Canterbury, Richard Hernandez, Lillibeth Navarro, Chris Otero, Cynde Soto and Jennifer Stark were present.

Board members absent: All members present.

2. Resolution to Continue to Hold Board Meetings Via Tele Conference in Accordance with AB361 – *Attachment B*

Janet called the attached Resolution AB 361 to the Board's attention and asked Debi Hight to elaborate on it. Debi explained that AB 361 sets forth Brown Act restrictions during declared emergencies and she read the motion which was an attachment in the Board packet.

Motion to approve the Resolution on AB 361, moved by Richard Hernandez, second by Jennifer Stark, motion passes with consensus.

3. Reading of the Mission Statement and Moment of Silence – Attachment C

Jennifer Stark read the mission statement. The Personal Assistance Services Council (PASC) strives to improve In Home supportive Services (IHSS) support independence and enhance the quality of life for all who receive and provide In Home Supportive Services.

Moment of Silence – Moment of Silence was observed for all requested intentions.

- 4. Public Comment None.
- 5. Consent Agenda
 - a) Minutes Approval of the September 13, 2021 Minutes Attachment D
 - b) Financial Report Approval of August 2021 ADMIN Attachment E-1
 - c) Financial Report Approval of August 2021 NPER Attachment E-2
 - f) Activity Calendar Attachment F (October 2021)
 - g) PASC Board Performance Measures August 2021 Attachment G (with stats)

Motion to approve the consent agenda, moved by Richard Hernandez, second by Steven Echor, motion passes with consensus.

Donna asked a question regarding the PASC Board Performance Measures August 2021 – *Attachment G*. She asked about the incoming calls to the registry, and Greg stated that the registry has been averaging 75% answered calls. He will verify the information and report back. Donna also asked about the abandoned wait time 1 hours 49 minutes and Greg stated that was an error and it should be 1 minute 49 seconds. She also asked about the total calls disconnected and Greg apologized and stated that he will take a look the numbers and report back.

Lyn Goldfarb commended Willis Oliver for the Board minutes. She also asked about a meeting on the activity calendar labeled the Los Angeles County Commission on Aging and would like to know if there are talks about the new aging department and is this something that PASC regularly attends and what happens at this meeting. Greg stated that a PASC staff does attend this meeting but it does not discuss the new aging department other than trying to hire a new director to run that department. Greg also stated that he has spoken to several people trying to get information on the new department.

6. PASC Board Elections

Janet proposed the slate of officers below:

Chair – Cynde Soto Vice Chair – Janet Heinritz-Canterbury Secretary – Donna Fields Treasurer – Chris Otero Officer-at Large – Jorge Chuc

Janet called for each position and any new nominations from the floor.

Each person on the proposed slate of officers made a comment regarding their position and their willingness to serve if elected.

Donna called role for the slate as it stands and there were no objections and the above slate is approved unanimously.

7. Board Chair Report - Janet Heinritz-Canterbury

a) General Comments/Board Comments:

Janet talked about how the PASC Board number one job is to educate the Board of Supervisors on IHSS and the problems that consumers are facing. She referred to the PASC Annual Report that was included in the Board packet and suggested that the Board read it and she emphasized that they read her letter and the letter from Greg regarding the issues that PASC faces. She noted that both letters talk about the provider shortage crisis and the need for PASC and IHSS to be included in the new Aging Department that is being created in LA County. She encouraged Board members to talk about the points in the letters with their Board of Supervisor and DPSS staff and their staff.

Janet also talked and read an insert about the provider shortage addressed in a study by the CEO's office in 2016 and presented to DPSS. She said the study, which was never discussed with PASC actually included recommendations that involved PASC. The study clearly shows the provider shortage and concludes that thousands of IHSS consumers are going without a provider because they can't find one. She also stated that in January 2013, 5% of the IHSS caseloads in LA County had no providers and that was close to 10,000 people and that PASC was not involved nor notified of this information. She also expressed her frustration and asked Cynde how she would approach elected officials to talk about the provider shortage crisis. Cynde stated that telling her story, her personal situation regarding the issue of finding and keeping a provider is the best way to convey a message and people can relate.

Steven asked if a form or a questionnaire can be developed to get out to consumers to allow them to write down why they have lost their provider or why they are unable to find one. ?

Janet responded that there is something on the PASC website that asks people for their stories and she asked Greg if that page was still on the website and if he has heard any stories from people. Greg stated that he doesn't think so and that he would have to check. He also addressed Steven's question and stated that it is not a bad idea, and he referred back to his report in the PASC annual report as well as the California State Auditor Controller's Report regarding provider retention and other issues in 2020. He also stated that in 2016/2017 in the contract negotiation, DPSS did start to insist that PASC track certain things and PASC has tried to do that. However, he stated that the study was never presented to PASC and he mentioned PASC's funding issues. Janet added and commented that PASC is paid less per consumer hours than any other Public Authority in the state. Greg responded and stated that there are 2-3 other Public Authorities that get more funding than PASC for a variety of reasons such as LA County not investing in the registry and not allocating the money when their money could have increased the amount of money PASC would receive from federal and state sources. He also stated that PASC was allocated five cents per consumer hour. He also talked about how the LA county PA administration fund should be over 12 million dollars but receive about 4 million dollars and these are the issues.

Lyn talked about how PASC needs to be on public record with the BOS and believes that presenting stories and documentation is really important and should be presented at the BOS meetings. Janet stated that Greg has a request in to meet with the BOS and Greg stated that the meeting has been scheduled for Wednesday, October 27th and Greg will report to the Board deputies. He also agreed with Lyn's statement and will strategize how to get into a BOS meeting. Lyn also asked if the cluster meeting will be on public record or if there are minutes and Greg stated that it is not a public meeting but there will be minutes.

Janet added and stated that all of the BOS deputies will be present at the cluster meeting and it will give PASC an opportunity to talk about PASC and the various issues with IHSS.

Cynde asked about the per case load cost and Greg talked about the Coordinated Care Initiative (CCI) and explained the state general funds which was unspent and how other PA's felt about LA County leaving unspent money. Greg also talked about the Maintenance of Effort (MOE) and the county contributions and how each county could increase their funding by 5% each of the 3 years of CCI. He stated that some counties took advantage of that 5% and LA County did not take advantage of the 5%. When the CCI ended, there were 7 public authorities that were receiving more funding than PASC. He also explained the change in the CCI and the MOE and how it affected the counties financially and he talked about the state and federal contributions and how LA county does not contribute to the PASC administration funds. He also talked about a lump sum of IHSS dollars that is divided between all of the PA's and some PA's get more in state funds than others.

Jennifer asked if there was a legitimate pathway to realignment and a legitimate claim to illustrate how PASC should be realigned in terms of other counties. Her second question is about the county's priorities for 2021 in their health programs which doesn't mention people with disabilities. She stated that we can go to the BOS public meetings and make public comment and she stated that before the BOS sets their budget, people with disabilities needs to be called out specifically in their priorities. Greg stated that the BOS are meeting virtually and we can look at the agenda and submit a public comment and make it virtual. When it opens up for in-person attendance, we can go into the BOS meetings and ask to make general comments that are not the agenda. Jennifer also asked if the staff has the bandwidth to give them notice before county board meetings and give the PASC Board members talking points. Greg stated that the Board of Supervisors meets every Tuesday and the Board agenda and links for making comments are posted on the website.

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Lillibeth asked about the funding per IHSS consumer and she thinks the message should be that consumers need the funding to improve the program and she referred to the registry and how it needs to be more funded and effective and to make a stronger case. Greg stated that the general admin fund funds the PASC registry and he explained what it is and what it does and doesn't fund.

Lyn suggested to organize a plan about going to every BOS public meetings and figure out what points should be covered and she also talked about the county non-contribution.

Lyn also suggested that we meet with our state senator and she stated that she will set a meeting with Senator Maria Elena Durazo and we can do a presentation to let her know what is happening. Greg stated that his recommendation is to focus on the county because the state will kick it back to the county and the county made the decision to cap the funding and slowly increased it. He stated that Lyn could talk to the state if she thinks it will pressure the county but his experience has been different. Lyn stated that it is not just about the funding it is about them understanding the issues and suggested that she would happy to set up a schedule for the BOS meetings. Janet added and talked about the new aging department.

Donna commented and agreed that we need to participate in the BOS meetings.

Chris stated that she thinks that it is important to be at the BOS meetings but we need to not only tell them the issues but give them the solution that we would like to see, at least a starting point to give them something to grasp on.

- 8. Executive Director's Report Greg Thompson
 - a) PASC Re-opening Updates Luis Bravo This was not discussed.
 - b) PASC Annual Report Attachment H

Greg brought to the PASC Board's attention the PASC Annual Report that was included in their Board packet and referred to it and expounded on it. He also talked about PASC's funding regarding the IT department.

Lyn asked about the CEO's report and asked that it be sent to her, and Janet stated that she will send it. Greg also stated if you click on the link in his report, it will take you to the California Controller Auditor's Report.

Greg also praised Julie Lieder and the other departments for the work that was done over the years regarding the annual report which has saved PASC a great deal of money by doing it inhouse.

Lillibeth asked about when they do a presentation to the BOS can that have a graphic presentation like the annual report and Greg said yes and talked about the CFL which shows the funding in IHSS.

Chris asked if Greg received any acknowledgments for the annual report and Greg stated that he has present it to the BOAS deputies and they have had questions and showed interests. He also clarified that PASC has been put on the agenda for the Board of Supervisor Deputy cluster meeting for October 27 where he will present the annual report.

Wilma commented and suggested they need to have more communication and connections with the BOS deputies. She also stated that she was not able to connect with them by phone and she agrees that PASC needs to be seen and heard. She also shared her thought about the PASC Board election process. Greg stated that he will ask Willis to send her the correct number of who appointed her. He also stated that we tried to get her to comment during the election and he apologized if there were any technical difficulties.

Greg also talked about the letter he received from DPSS last week regarding IHSS opening their offices to the public and wanted PASC to open its office on October 4th. PASC was already in its later phases of bringing in staff and PASC is currently open to the public.

Lillibeth asked about the membership with CAPA and how much of a robust discussion do we have regarding funding and if the other PA's are helping us and how does CAPA see PASC. Greg stated that we now have a base allocation and CAPA gets to divide the money up and the state comes up with an amount for all 58 county PA's. He explained that process and the methodology as well as he talked about the more recent increase that was given to PASC by the state and not by the county.

9. Legislative Update – Debi Hight

Debi talked about CDPH which issued a large public health order on September 28th. One of the components to that order is to require all IHSS providers be vaccinated for COVID-19 and she explained the requirements and exemptions as well as the order itself. She also talked about the heroes pay for IHSS providers which will be state administered and coming through the American Rescue Plan Home and Community Based Services Funding that the state received. It will be a one-time \$500 payment to each current IHSS provider that provided IHSS services during the minimum of three months between March 2020 and December 2020. She also talked about items at the federal level and that they have postponed a vote on the reconciliation bill and the infrastructure bill. She also talked about the Better Jobs Better Care Act that was talked about at a prior Board meeting and the 400 billion dollars going into improving the quality of home and community-based services. This has been rolled into the reconciliation bill and it is now down to potentially 190 billion dollars. She also stated that it was supposed to be voted on but has been postponed until the end of October. Congress passed an emergency funding measure to keep the government open but they are still debating on the reconciliation bill. Debi also stated that she will be sending Janet an email regarding the social security administration payment increase to people who receive supplemental security income.

Janet asked Debi regarding the training money and Debi stated that its part of the American rescue plan and home and community-based services fund.

Steven asked for clarification regarding the mandate for IHSS providers to be vaccinated and Debi went over that mandate and the requirements for providers and consumers and the consequences. PASC is waiting on guidance from the state.

Donna talked about the reconciliation bill in Congress that she mentioned last month and stated that it is really important.

Lyn commented and stated that she thinks that maybe we need to be protesting this to the state and that it is putting a burden on the consumers and suggested that Debi write something on behalf of PASC to assert what the issues are and why this is not a good idea. Debi responded and asked Lyn for clarification that the county and PASC keep track of the data and notifying consumers? Lyn stated that for the vaccine mandate, it is hard and puts an unfair level of and potentially dangerous responsibility on the consumers and have IHSS certifying it instead.

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Debi states that it is similar to the public health order and Janet added her comments that the IHSS consumer is the employer and any intrusion on this relationship threatens the model and she would be very uncomfortable to support this position.

Steven asked if there will be an official notification to provide us with the decision that was passed and Debi stated yes and it was issued by Department of Public Health on September 28th and she stated that Greg may know how people will be notified. Greg stated that the information will be on the portal and the guides will come from CDSS to DPSS. Greg also stated that a lot of consumers pushed for this and consumers tend to push back when you start to take responsibilities away from them and the Board can decide what position it wants to take but it would contradictory to the IP Mode to have PASC or DPSS to take the responsibility.

Chris agreed and gave comment and referred to the IP Mode and does not think that PASC should take a position.

Richard asked if the consumer does not want to get the vaccine, does the consumer need to make the provider get the vaccine? Greg stated that consumer can terminate the provider and it is a choice on both parts.

Jennifer asked for a point of order and stated that if the Board wanted to make a recommendation, it would have to be agendized first and Debi said yes. Jennifer also stated that the IP Mode falls in favor of the consumer being the employer.

Steven asked why does the language say it is mandatory when it is not and Janet stated that it is not being enforced but being put out there and consumers will enforce it how they choose.

Greg asked if DPSS had any thoughts that if there is a new provider, would the vaccination requirements fit there?

- 10. Report from SEIU 2015 Wendy Duchen/Vernita Randall: No Representative Present
- 11. DPSS: Ying Chan reported:

TOPIC	UPDATE
IHSS Helpline Data	 For the month of August 2021, the IHSS Helpline: Received 129,795 calls with an average wait time 8:50 minutes. Calls handled by Social Workers had an average wait time of 8:29 minutes. Calls handled by Senior Clerks had an average wait time of 8:55 minutes. General inquiries/calls: Case updates/changes. Assessment/Reassessment Payment/Timesheet issues. Provider Enrollment.
IHSS Stats	IHSS Caseload as of September 2021: Recipients: 239,525 Providers: 193,943

I have good news to report on our two vacancies: **Governing Board Vacancies** Our Director has approved the selection to the Board and they are pending final appointment by Board of Supervisor. **Outreach Efforts** We sent a text message to providers regarding the expiration of the IHSS Provider Enrollment Requirements Waiver. This waiver allowed the IHSS providers to receive a temporary exemption on the following enrollment requirements because of the pandemic: Photocopying of original documentation to verify the prospective provider's identity, such as identification or Social Security Number (SSN); and Signing of the IHSS Program Provider Enrollment Agreement (SOC We did the one-time text campaign on Tuesday, September 28th to remind IHSS providers to complete their provider enrollment process. We then received notification this past Thursday (9/30) that the State was extending these requirements from September 30, 2021 to the end of the State of Emergency. This was done because some counties are still closed at the direction of the Board of Supervisors. So, any provider who previously has not provided their verifying document's or the signed SOC 846, they have until the end of the State of Emergency to provide to the county. However, as we have reopened our doors, this 'waiver' will not be applied to them. They will be required to provide these documents in person. PHILIPS Oxygen-Related Medical Device Recall Slider We received notification that the Medicare program recently issued a consumer alert on a large recall by Phillips of a variety of oxygen-related medical equipment, including C-PAP machines and other ventilators. The alert tells consumers what to do if they use this equipment and explains Medicare payment policies for replacement units. Phillips has set up a website to provide more information. To assist in getting the word out, we are developing a web slider that will run on our DPSS webpage for two weeks. **IHSS** Our department effectively reopened on October 1, 2021. The IHSS Regions are open and are providing service to consumers and/or providers who want in-person services. However, the offices are following the CDC and DPH guidelines to limit lobby capacity (about 25% of normal capacity) and to social distance. Provider enrollment/orientation will continue to be online, until further notice. Recipients and providers can continue to contact the IHSS Helpline for assistance. The IHSS Helpline hours are Monday thru Friday from 8am - 5pm, 1-888-822-9622.

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Lillibeth asked when DPSS receives calls from IHSS consumers, how do they handle calls for abuse. Ying stated that they have channels if there is abuse going on, they have APS and they will make the referral and referral will be made to the appropriate agency based on the reports. Lillibeth also asked do they get help finding a replacement or are they on their own finding.

Ying reiterated what she stated above and she stated that the social workers do work with PASC in case of an emergency when there is no provider. There is the BUAP in place and the social workers to provide assistance in these situations to keep communication with the consumers as well as with the APS workers.

Janet asked for clarification on the provider waver and Ying reiterated what she stated in her report and explained further.

Greg asked Ying about new providers showing proof of vaccination and Ying stated that she is not aware of any new requirements on that part because at the end, DPSS is not the employers and the consumers are the employers and they are to track and monitor whether their providers have the vaccination card or not. She also stated that DPSS as well as PASC are not authorized to track and monitor the vaccination of the providers and this goes for new and existing providers. Janet asked about providers who are in the beginning stages of applying and does not have a consumer to work for. DPSS would have an opportunity to ask them or to enforce the rule and this is a way where the mandate can be used. Ying stated that DPSS is not doing that.

Lyn asked what is the difference the vaccination requirements and the CBI requirements and Ying stated she can only state what the policy is and she reiterated that it is not up to the county and PASC to monitor and track.

Cynde asked if DPSS can give notice to a new provider in writing regarding the vaccination mandate because they may not know and Ying stated she can take that question back because she is not sure and once she has an answer she will provide the answer to Janet.

Jorge stated that as a point to view as a consumer, this is something that can be brought up to the supervisors and he gave is opinion on this subject.

Lillibeth stated that it should be clear that it is a guidance, a guideline and the relationship between the consumers and the providers is delicate and gave her opinion.

- 12. Unfinished/Old Business None
- 13. New Business Future Agenda Items None
- 14. Closed Session -

Open Session -

- 15. Mission Moments None
- 16. Adjournment Janet Heinritz-Canterbury adjourned the meeting at 3:13pm.

Steven asked a question on behalf of Hunger In Action in regards to verifying if a consumer passed away. He stated that Hunger In Action tried to go to the county and the county would not release any information. Steven asked if a consumer has a provider, is there any reason that providers are not allowed or required to confirm if a consumer has past away to an outside party? Janet referred to the IP Mode and the relationship between the consumer and the provider.

Greg stated that if Hunger In Action is concerned, if the person is in danger, they could call the police or call APS and the provider can call the DPSS helpline. Ying stated that if the question is addressed to IHSS, when a client passes away, the provider does have a responsibility to report to DPSS that the client has passed away, because there is a payment issue and the provider doesn't get paid after the client has passed away. Ying stated that it is important that the provider make a report and she stated that she cannot speak for other agencies. Donna wanted to clarify the minutes for last month from a comment Lyn made and Donna stated that Willis had surgery on his hand and he did a wonderful job with the minutes. Willis thanked Donna and the Board for the acknowledgment. Motion to adjourn the meeting, moved by Steven Echor and seconded by Lillibeth Navarro, motion passed with consensus Approved by: Date:

Attachment C