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MAY 1 3 2004

RESOLUTION NO. 04 - 90

PATRICIA GRITTENDEN, CLERK OF THE BOARD

BY Symplax Claurch

RESOLUTION ESTABLISHING THE YOLO COUNTY COMMISSION ON AGING AND ADULT SERVICES

WHEREAS, on March 4, 2003, the Board of Supervisors unanimously approved a request to analyze advisory boards and committees relating to the needs of the aged and disabled, and report back to the Board recommendations for streamlining and elimination of duplication therein; and

WHEREAS, the County Aging Commission, the Long Term Care Coordinating Council, and the Adult Day Health Special Advisory Board have considered this issue at great length in multiple meetings in the time since this request; and

WHEREAS, the conclusion arrived at by each of the above named bodies and the staff of the County Administrative Office is that there is duplication of mandates, services and missions between these groups; and

WHEREAS, the County Aging Commission, the Long Term Care Coordinating Council, and the Adult Day Health Special Advisory Board have all voted affirmatively to recommend that the Board of Supervisors abolish each of these bodies and create and inaugurate a new Commission on Aging and Adult Services incorporating and integrating the functions and responsibilities of these advisory bodies;

NOW, THEREFORE, BE IT RESOLVED by the Board of Supervisors of the County of Yolo as follows:

- 1. The provisions of Resolution No. 73-148 creating the Commission on Aging, Resolution No. 83-185 creating the Adult Day Health Special Advisory Board, and Minute Order No. 02-138 creating the Long Term Care Coordinating Council are declared to be no longer in effect and these advisory bodies are dissolved and the remaining terms of all members of these advisory bodies are ended; and
- 2. There is hereby created a Commission on Aging and Adult Services, with the membership requirements, term of office, officers, duties and meetings requirements as set forth in the attached Exhibit A. The provisions of Exhibit A shall control in the event of a conflict between its provisions and those provisions of the Uniform Rules found in Article 36 of Chapter 2 of the Yolo County Code.

PASSED AND ADOPTED by the Board of Supervisors of the County of Yolo, this 4th day of May, 2004 by the following vote:

AYES: Thomson, Sieferman, Jr., Yamada, Pollock, McGowan.

NOES: None.

ABSENT: None.

ABSTENTIONS: None.

Mike McGowan, Chair

Yolo County Board of Supervisors

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Approved as to Form:

Steven M. Basha, County Counsel

Attest:

Patty Crittenden, Clerk

Board of Supervisors

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Deputy

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EXHIBIT A TO RESOLUTION ESTABLISHING THE YOLO COUNTY COMMISSION ON AGING AND ADULT SERVICES

I. Membership.

The Yolo County Commission on Aging and Adult Services shall be composed of fifteen members, appointed as follows:

- a) Each member of the Board of Supervisors shall recommend for appointment one person who resides in their district to be a member of the Committee. In the event that the Clerk of the Board has sought applicants on at least two separate occasions and no applicant has been recommended for appointment by the Supervisor for a given district, the Board of Supervisors may then appoint any interested person regardless of their residency as the member for that district.
- b) The County Administrative Officer or his or her designee and the Public Guardian or his or her designee shall also serve as members.
- c) The member of the Board of Supervisors who is assigned by the Chair as the Board Liaison to the Commission on Aging and Adult Services shall be a member.
- d) The Commissions on Aging for the City of Woodland, City of Davis, and City of West Sacramento shall each appoint one of their members to serve as a member of the Yolo County Commission on Aging and Adult Services. Should any of these cities disband or otherwise dissolve their Commissions on Aging, then the member having been appointed from the dissolved or disbanded commission shall cease to be a member of the Yolo County Commission on Aging and Adult Services, and the resulting total membership of the Yolo County Commission on Aging and Adult Services shall be reduced by that number.
- e) Four (4) members at large selected from any of the following groups: institutions (hospitals, skilled nursing facilities, residential care facilities for the elderly), consumers (seniors and younger disabled), treatment professionals, insurers (e.g., Partnership Health Plan), caregivers, AARP, government or non-profit care or case management professionals. Should the Board of Supervisors be unable to attain sufficient applications from persons representing the above-named groups to fill any or all of the four member-at-large seats, then any interested person may be appointed.

II. Term.

The members of the Yolo County Commission on Aging and Adult Services designated by a city commission on aging as well as the County Administrative Officer or his or her designee and the Public Guardian or his or her designee shall serve at the pleasure of their designating authority and shall not have a fixed or limited term.

The term of office for all other members appointed to this Commission shall be two years beginning January 31 of each odd-numbered year. There is no limit on the number of terms a member may serve.

III. Officers.

The member of the Board of Supervisors who is assigned by the Chair as the Board Liaison to the Commission on Aging and Adult Services shall serve as the Chair of the Commission of Aging and Adult Services. At the Commission's first meeting of each calendar year, its members shall elect another of their own to serve as Vice-Chair.

IV. Secretary.

The Director of the Department of Employment and Social Services shall designate one of his or her staff members to serve as ex-officio Secretary and Clerk of the Yolo County Commission on Aging and Adult Services. The Secretary shall not be entitled to vote on any business before the Commission.

V. Duties.

The Yolo County Commission on Aging and Adult Services shall have the following duties:

- a) Review and make recommendations to the Board of Supervisors on issues and policy questions relating to the aged, disabled, or other adults needing the protection of authority;
- b) Serve as the County's policy liaison to the Area 4 Agency on Aging;
- Review, consider, develop and advance plans for Board of Supervisors' consideration for better coordination of County resources devoted to the aged, disabled, and other adults needing the protection of authority;
- Review and make recommendations to the Board of Supervisors on state and federal legislation and regulations pertaining to the aged, disabled or other adults needing the protection of authority;
- e) Receive reports, information, analysis and testimony from County and other officials, local residents, and other interested parties on matters relating to the aged, disabled, or other adults needing the protection of authority;
- f) Make a report annually to the Board of Supervisors on the state of County efforts to address pressing issues and needs as they relate to the aged, disabled, or other adults needing the protection of authority; and
- g) Any other duties delegated to this Commission by the Board of Supervisors.

VI. Meetings.

Meetings of the Yolo County Commission on Aging and Adult Services shall be conducted in compliance with the Ralph M. Brown Act. The Commission shall meet as often as necessary, as determined by the Chair of the Commission or a majority of the Commission, but no less frequently than four times each calendar year.

VII. Provisions Take Precedent Over Uniform Rules.

The provisions of Exhibit A shall control in the event of a conflict between its provisions and the provisions of the Uniform Rules found in Article 36 of Chapter 2 of the Yolo County Code.

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BOARD OF SUPERVISORS Yolo County, California

Meeting Date: May 4, 2004

To: CAO
County Counsel
Auditor
Plan & Pub Works
Alcohol Drug/MH
Health Services
Human Resources
DESS
Liaison
Aubite Guardian

Agenda Item No. 43 County Advisory Groups on Adult, Aging and Disability Issues

Minute Order No. 04-164: Received and filed report on County advisory groups on adult, aging and disability issues and took the following action:

- A. Adopted and authorized the Chair to sign Resolution No. 04-90, Resolution establishing the Yolo County Commission on Aging and Adult Services and abolishing the Commission on Aging, the Adult Day Health Special Advisory Board, and the Long Term Care Coordinating Council.
- B. Directed the Clerk of the Board to commence recruitment for members of the Commission on Aging and Adult Services, to be presented to the Board of Supervisors for consideration.

MOTION: Yamada. SECOND: Thomson. AYES: Thomson, Sieferman, Jr., Yamada, Pollock, McGowan.

County of Yolo

VICTOR SINGH County Administrative Officer



COUNTY ADMINISTRATIVE OFFICE

625 Court Street, Room 202 Woodland, CA 95695 (530) 666-8150 FAX (530) 666-8147 www.yolocounty.org

TO:

Honorable MIKE McGOWAN, Chairman, and

Members of the Board of Supervisors

FROM:

JOHN D.R. CLARK, Deputy County Administrative Officer;

DONALD H. ISHIKAWA, Principal Administrative Analyst; and

CASS SYLVIA, Public Guardian-Public Administrator

DATE:

May 4, 2004

RE:

Report on County Advisory Groups on Adult, Aging and Disability Issues

Recommended Action:

That your Board:

a) Receive and file this report;

b) Approve the attached Resolution creating the Commission on Aging and Adult Services and abolishing the Commission on Aging, the Adult Day Health Special Advisory Board, and the Long Term Care Coordinating Council; and

c) Direct the Clerk of the Board to commence recruitment for members of the Commission on Aging and Adult Services, to be presented to your Board for consideration.

The Commission on Aging, the Long Term Care Coordinating Council, and the Adult Day Health Special Advisory Board have all met in public session and have formally voted to recommend that your Board approve these recommended actions.

Fiscal Impact:

None direct.

Reason for Recommended Action:

On March 4, 2003, your Board received a report on the progress of long-term care efforts in Yolo County. While the various groups involved have enjoyed some success in raising the profile of the issue and in identifying problems, progress in terms of new programs has been limited due to the lack of funding at the State and Federal levels, coupled with a confusing maze of overlapping (or sometimes non-existent) regulatory and oversight authorities.

At this same meeting, your Board also approved a request to the CAO to review the possible overlap and duplication of mission and activities of the following advisory bodies:

IHSS Advisory Committee
Commission on Aging
Long Term Care Coordinating Council
Adult Day Health Special Advisory Board
Developmental Disabilities Committee
YoloLINK 211 Steering Committee
Area 4 Agency on Aging Governing Board and Advisory Council.

In this request, the CAO was also directed to examine how the following activities and ad-hoc task forces might best be tracked:

Olmstead State Working Group
AB 1040 Working Group
City Commissions on Aging for Woodland, Davis and West Sacramento
Partnership Health Plan LTC Initiative Working Group
USC-UCLA LTC Options Working Group.

We address these two requests separately, herein.

Note that the request from the Board of Supervisors did **not** include studying the Health Council. It is our assessment that the Health Council's functions and duties do not overlap significantly with those of the groups being analyzed as part of this report, though it may be fruitful to consider these relationships again in the future.

Background:

Aging and disabled issues suffer from an extreme degree of Balkanization. The federal government funds programs for the elderly through the Administration on Aging (AoA), which in turn passes through funds to Area Agencies on Aging (AAAs), which are comprised of one or more counties. Yolo County is part of the Area 4 Agency on Aging, which also includes Sacramento, Nevada, Yuba, Sutter, Sierra and Placer counties. AAAs receive funding for congregate and home-delivered meals, recreation and social activities, case management, respite care, transportation, senior information and assistance, and other programs but do not, as a rule, deal much with medical/treatment programs.

Medical and other treatment programs are funded through Medicare and Medicaid (Medi-Cal here), which is a separate unit in the U.S. Department of Health and Human Services, the Centers for Medicare and Medicaid Services. In-Home Supportive Services (IHSS) is yet another service that is mostly funded through the federal government, but is again managed and regulated through a different part of federal-HHS. Finally, protection of the elderly and vulnerable adults is a patchwork of mostly State-authorized programs including Adult Protective Services (APS) and the Public Guardian-Public Conservator in each county.

Further complicating this picture is State-level oversight of these federally-originating programs, coupled with State administration of programs like APS. Programs funded by the AoA are administered and supervised by the California Department of Aging (CDA). APS is part of the California Department of Social Services. The Public Guardian is a county-mandated function that is regulated, in a sense, by the local Probate Court. Programs for the developmentally-disabled (DD) are also separate, being funded by yet another part of federal-HHS and

oversighted by the state Department of Developmental Services. APS, AAAs, IHSS, Public Guardians and DD programs are all authorized and regulated in different sections and sometimes different codes within California law.

As has been noted before, the silo effect of these programs makes coordination and management extremely difficult, particularly at the county level. The present situation is a product of more than 100 years of changing concepts about the nature of aging, disability, and adult protection. The complicated structure we now operate within is based on a separation along programmatic lines:

Senior citizens, social/personal needs = Area Agencies on Aging

Senior citizens, medical needs = Medicare, Medicaid, administered through State and local governments and private providers, when eligible – other insurers or providers if not

Senior citizens, long-term care needs = IHSS, to the extent that the senior qualifies and is well enough to remain at home

Seniors needing institutional care may qualify for Medicaid reimbursement of nursing home costs, if they "spend down" their assets to \$2,000 and have a low enough monthly income

Area Agencies on Aging for needs such as home-delivered or congregate meals, among others

Senior citizens, protection = APS, Public Guardians

Disabled citizens, social/personal needs = State Department of Developmental Services

Disabled citizens, medical needs = Medicaid, sometimes Medicare, when eligible and/or State Department of Developmental Services

Disabled citizens, long-term care needs = State Department of Developmental Services, or IHSS, if eligible and able to stay at home, or none, if not meeting criteria

Disabled citizens, protection = APS, Public Guardians

The above categorization does not take into account persons suffering from a mental illness who, of course, could also be a senior citizen and/or a person with a physical disability. The net result of this confusion is that each agency tries to serve its client, or fulfill its programmatic mission, without reference to the "whole" person who may overlap into several categories. The fact that funding and oversight is rigidly constructed along these lines means that AAAs, for example, have no funding and no incentive to tackle long-term care needs, which are mostly seniors, but also include many younger disabled and/or the mentally ill.

The present structure of advisory bodies in Yolo County reflects this silo effect. Each of the committees referenced in the charge from the Board was formed to serve a specific population using the demarcations originally created by the federal and/or State governments. These largely artificial distinctions created 10, 20 or 30 years ago contribute to the confusion of mission and responsibility mentioned by your Board.

Further, the overlap and "mission drift" that several of these groups suffer from contributes to another phenomenon: the unreachable quorum. Each of the formally-organized groups listed above has at least several vacancies of a longstanding nature, some groups are at as little as 1/3 of their authorized strength, despite valiant recruitment efforts by members of your Board, the Clerk's office, and departmental staff. One also notes the frequency of member duplication, where one person sits on multiple committees.

Solutions: Formally-Organized Groups

Over the past year, we have met with these groups as well as staff liaisons to solicit some initial ideas and thoughts. By and large, the persons we have spoken with share our feeling that the current structure contains too many artificial boundaries, and a general sense that there are too many groups overall chasing too few dollars and too few programs.

Having noted this, it is also important to emphasize that there was also a clear feeling that each group, no matter how challenged they are at present, is reluctant to subsume their identity entirely within another body, and thus lose the "focus" on that issue. The challenge posed by more than a few of these group members was how to streamline the present structure without making the resulting bodies too broad in focus.

It is worth noting that Yolo County's experience is far from unique. Almost every county in California suffers from the silo effect described above, and varying methods have been employed with similarly varying results. A few years back, the preferred administrative solution was to create vast "health and human services" agencies that coagulated all social, health, aging and mental health programs under one department. That solution now being somewhat disfavored, the more recent direction has been the creation of "aging and adult services" departments that marry APS, Public Guardian, IHSS and sometimes aging programs under one roof.

In the February 26, 2002 Board Letter that created the Long Term Care Council and set forth the goals of Yolo County in terms of long term care, a goal of creating a department or office of aging and adult services was adopted. This reflects the trend we see statewide, to try and parse the bureaucracy along demographic lines instead of programmatic ones. Thus, an aging and adult services structure may serve any older *and/or* vulnerable adult, with whichever service or services he may need. This is still a viable goal in the future, though the considerable impediments that exist at the State and federal level may make this a long-term objective.

There is, however, merit in first attempting this sort of consolidation at the advisory-body level. This would provide the County with the opportunity to "try-out" a more demographic organization for these programs and services, as well as create a vehicle to "work out the bugs" well in advance of any administrative consolidation or reorganization. Alternatively, if this organizational typology is not found to be optimal, changes can be made prior to the tumult of a staff and departmental reorganization. It is also our sense that this consolidation would be an opportunity to pare down the list somewhat to fewer bodies with greater responsibility and thus

be more attractive to potential members. The quorum problem is serious and is likely to be addressed only through some judicious pruning of the advisory tree.

IHSS Advisory Committee

It is our recommendation that no changes be made to this group. While the IHSS-AC suffers too from the vacancy problem, the group is active and has specific statutory language mandating its existence in an independent form. At the same time, the Governor has proposed the elimination of some or all public authorities, should this happen, it may be useful to re-examine the possible incorporation of the IHSS Advisory Committee into the new Commission.

Commission on Aging

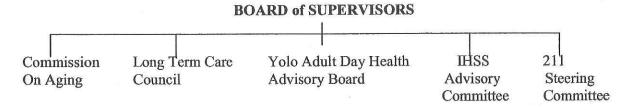
This group has also suffered from hard-to-fill vacancies, but has a core group of members committed to senior welfare. This group has also demonstrated the ability to prioritize and work through programs internally, without large amounts of staff time or outside resources – and produce tangible results.

It is recommended that this group, along with the Long Term Care Coordinating Council and the Yolo Adult Day Health Advisory Board be reformed as the Commission on Aging and Adult Services and that the newly formed commission be charged with responsibility for:

Senior issues Long-term care issues Serving as the advisory board for Yolo Adult Day Health Liaison to A4AA

An important adjunct to this recommendation is a greater amount of delegated authority from your Board to this new Commission on Aging and Adult Services. Specifically, the need for task forces or working groups on long term care issues, needs of the younger disabled, and myriad others indicate the need for enabling language in the creation of this new commission allowing it to create task forces of up to nine members and for a duration of up to 1 year. Such task forces could, but would not be required to, include members of the commission itself, and would serve as a way to elicit specialized input for a limited period of time.

Thus, the current situation is:



And what is proposed is:

BOARD of SUPERVISORS

IHSS Advisory Committee

Commission on Aging & Adult Services

211

Steering Committee

1-year time-limited task forces, as needed, e.g.:

- Long Term Care plans
- Needs of younger disabled
- HIPAA

The function of advising your Board on adult day health issues, by contrast, would be an ongoing responsibility of the new commission and would be performed as a matter of course.

Membership is another issue to address. At present, the Commission on Aging is authorized for three members from each supervisorial district. Filling all of these slots has been difficult, as referenced above. At the same time, maintaining geographic balance is an important goal.

Accordingly, we recommend the following membership protocol for your consideration:

1 member from each supervisorial district = 5

The Board liaison, or his or her designee = 1

The CAO, or his designee = 1

The Public Guardian = 1

One member from Woodland, Davis and West Sacramento Aging Commissions = 3

4 members at large, selected whenever possible, from any of the following groups: Institutions (Hospitals, Skilled Nursing Facilities, Residential Care Facilities for the Elderly), Consumers (Seniors and younger disabled), Treatment professionals, Insurers (e.g., Partnership Health Plan), Caregivers, AARP, Government or Non-profit care or case management professionals.

= 15 total.

The existing Commission on Aging as well as the Long Term Care Council and the Yolo Adult Day Health Advisory Board would be abolished and their seats vacated. These members would then be encouraged to apply for a seat on the newly formed Commission on Aging & Adult Services or, alternatively, ask for consideration of a seat on a preferred task force, once the new commission has had the opportunity to consider creation of such task forces.

As for the categorical membership issue, it has been observed that one of the stumbling blocks to full membership on the existing groups is the many narrowly-defined categorical seats (e.g., "representative of Yolo County nursing homes"). While categorical seats insure that all stakeholders are at the table, there have been many instances where such stakeholders flatly refuse to participate, making the transaction of regular business difficult. In the spirit of democracy, where a person of good character and intention is presumed to have the ability to understand and empathize with situations different from their own, we believe membership can

safely be left to your Board's final discretion, and suggest only that the above categories be borne in mind when appointments are made, but that they not assume the mien of canonical law.

Developmental Disabilities Commission

This group caters to the needs of the DD community, and appears not to overlap much, if at all, with the other groups. It is recommended that no changes be made to this group.

211 Committee

Although there may be some logic in also combining the 211 Committee into the Commission on Aging and Adult Services, some have counseled caution in that regard, since the focus of 211 is improved telephone access to all human services, not just those affecting seniors and vulnerable adults. It is our recommendation to wait on this consolidation until the 211 framework is more fully developed in other counties.

Area 4 Agency on Aging

The Older Americans Act which created the AoA and AAAs mandated that they each have a governing body *and* an advisory committee, with the majority of said committee being consumers (that is to say, seniors). This has created a situation where AAAs too have many seats chasing after relatively fewer applicants. This has been further exacerbated by the creation of "Focal Point Advisory Committees" which further dilute responsibilities and create still-more overlap between the governing body, advisory committee and the focal point committee.

Given that these structures are federal mandates, we see little opportunity to tinker with their structure. It is our recommendation that, whenever possible, Commission on Aging and Adult Services' members be appointed as Yolo's representatives on these bodies, to limit the vacancy problem discussed throughout this report.

Solutions: Ad-hoc Groups

Some of these groups are most appropriately "tracked" by staff, while others are more amenable to citizen involvement. Like the "task forces" envisioned above, most of these groups come and go, and are not intended to have a permanent existence. It would be our thought that as these groups arise from time to time, the need for representation could be discussed at the commission upon referral by your Board's liaison.

The need to coordinate better with our city's aging commissions would be achieved through having a member of each city's commission sit on the County commission.

Conclusion:

The gradual proliferation of advisory committees is a natural by-product of a complex organization like the County. This creates the need, from time to time, to judiciously prune the thicket and refocus the resulting groups on revised and reconsidered goals and objectives.

Generally, commissions that have serious work and a real mandate attract more potential members and tend to produce more tangible product. Creating a Commission on Aging & Adult

Services with a well-defined mandate will encourage more applicants and eliminate some of the mission-drift where there are too many advisory committees searching for a meaningful role.

Other Agency Involvement:

These issues have been discussed at several Commission on Aging meetings, several Long Term Care Coordinating Council meetings, as well as at a joint COA-LTCCC meeting and at a summit on Aging and Long Term Care issues hosted by then-Supervisor Rosenberg and Supervisor Yamada.

Attachment: Resolution creating the Commission on Aging and Adult Services