



December 13, 2019

Mark Ghaly, Secretary  
California Health and Human Services Agency  
1600 9<sup>th</sup> Street  
Sacramento, CA 95814

Kim McCoy Wade, Director  
California Department of Aging  
1300 National Drive, Suite 200  
Sacramento, CA 95834

**Re: County Principles for Master Plan for Aging**

Dear Secretary Ghaly and Director McCoy Wade:

On behalf of the California State Association of Counties (CSAC), the County Welfare Directors Association of California (CWDA), the California Association of Public Authorities (CAPA), the California Association of Public Administrators, Public Guardians, and Public Conservators (CAPAGPC), the Rural County Representatives of California (RCRC), and the Urban Counties of California (UCC), we are writing to share broad county principles related to the state's effort to develop a Master Plan for Aging by October 2020 and recommendations for the Long-Term Services and Supports (LTSS) continuum by March 2020. Counties serve older adults in California in a variety of ways – from ensuring individuals receive the services they are eligible for, to providing direct services to the most vulnerable, to planning age-friendly communities. Each of our organizations has a different role within these diverse responsibilities, but all of our organizations retain the same commitment to engaging in the Master Plan for Aging process and working collaboratively to identify strategies to best meet the needs of our state's growing aging population.

Counties appreciate the numerous opportunities that have been provided for engagement and input including participation on the Stakeholder Advisory Committee and Subcommittees and highlighting county best practices and innovations at committee meetings. As the California Health and Human Services Agency, the California Department of Aging, and the Stakeholder Advisory Committee evaluate recommendations and policy changes that impact county

programs and responsibilities, we recommend that the below principles be considered in that process.

#### Build on strengths of local successes in delivery of services

Counties administer multiple programs that older adults and persons with disabilities rely upon. The In-Home Supportive Services (IHSS) program provides critical long-term services and supports to low-income seniors and disabled individuals to help them remain safely in their homes. The Adult Protective Services (APS) program provides response and services to older adults and disabled individuals who are victims of abuse and neglect. County Public Administrator, Public Guardian, and Public Conservator (PA/PG/PC) programs serve as a safety net for individuals who are no longer able to act in their own best interests. Public Authorities assist IHSS providers and consumers through training, registry services, and benefits administration.

Together, these programs positively impact the lives of millions of Californians, providing older adults with the help that they need to live their lives in safety and with dignity, in their own homes and communities consistent with the 1999 U.S. Supreme Court Olmstead ruling which affirmed the responsibility of states to ensure that people with disabilities, including seniors and children, receive care in the most integrated setting. As changes to the overall system of aging in California are considered, we ask that these and other existing programs be seen for their past successes and their future potential to be built upon and expanded to serve our growing and diverse population. The Master Plan for Aging can, and should, utilize the strengths of these programs and their infrastructure to build a system of care for older adults that is coordinated, integrated, and maximizes leveraging of federal, state and local funding streams. We recommend integrating service delivery within existing county programs to leverage the county infrastructure and better align services to meet the needs of older adults.

#### Strengthen service delivery while retaining local flexibility to meet local needs

Counties support strategies that will strengthen the delivery of services to older adults across all counties. To that end, some uniformity in service delivery that is developed with stakeholder input at the state level is appropriate and necessary. However, while counties operate the same programs and provide the same essential services throughout the state, every county serves a unique and diverse population. Counties should retain the ability to have flexibility in providing services to best meet the needs of the aging population that each county serves. Rural counties have unique challenges such as less extensive public transportation networks, fewer non-profits to partner with, and a shortage of medical specialists. Urban counties are grappling with escalating housing costs and often need to accommodate numerous languages and cultures in the provision of services to meet the needs of diverse communities. It's critical that local flexibility for counties remains a priority as any existing programs are modified or new services developed.

#### Increase collaboration and coordination across programs and services

Counties also administer a number of other important programs that touch the lives of older adults, including Medi-Cal and CalFresh which provide critical health and nutritional supports, the Housing and Disability Advocacy Program (HDAP) and Whole Person Care Programs to address homelessness, Child Welfare Services which works with many older relative caregivers of foster children, and Behavioral Health and Public Health programs and services which support health and well-being. Many counties also directly administer or have close working relationships with other programs such as Veterans Services and Area Agencies on Aging. Counties also partner with community-based agencies that provide services and supports for older adults. In addition, counties collaborate with many local agencies to develop local

emergency operations plans that are an extension of the California Emergency Plan that must address special needs of the elderly and people with disabilities. All of these programs or entities provide important services to older adults, but in many cases those services are siloed and it is difficult for an individual to navigate the myriad of programs to get the support they need.

The Master Plan for Aging provides an opportunity to improve collaboration and leverage county-based services to improve the social determinants of health for older adults, their families and caregivers. Research indicates that social determinants of health, including access to transportation, housing, nutrition, and other elements, have a greater impact on health outcomes than direct health care services. These services must be coordinated across systems to support a “whole person” model of care. We also urge the relevant departments to consider how the ultimately agreed-on CalAIM waiver will interface with county and other community-based programs to serve older adults, their families and caregivers. The final plan should seek to increase collaboration across county- and community-based programs to ensure that services are more readily-available and accessible for older adults.

#### Ensure equitable access to services

Equitable access to services for all aging Californians makes good social and fiscal sense. It is vital that all aging Californians have access to the resources, opportunities, options, and supports needed to remain in their own communities. Research indicates that older adults who remain in their own community are more likely to receive consistent health care and sustain longer functionality. Counties are ready to work together to examine delivery of current services or develop new service models to overcome economic, social, geographic, or other barriers to equitable access to services.

#### Additional funding for workforce and programs to meet growing needs and gaps in services

There are significant opportunities available to expand services, identify innovative programs, and fill in gaps in existing services. These opportunities require additional funding to ensure sufficient workforce and to establish any new programs. A recent example of an innovative program is Home Safe, which allows county APS programs to prevent homelessness among victims of abuse and neglect. Counties stand ready to continue working together to identify new programs and cover any gaps in existing services.

Growing existing and adding new programs also mean growing the workforce serving older adults. Attention should be given to growing the workforce of caregivers, social workers, gerontologists, and others who are qualified to meet all the varied needs of the older adult population. The Master Plan for Aging should include strategies to increase collaboration with our educational system to recruit and build skills and knowledge in our workforce. We also recommend continued funding support for training of APS and PA/PG/PC staff, as this funding is currently set to expire in fiscal year 2022-23.

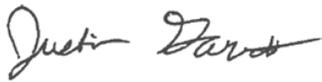
#### Adequate funding for current responsibilities

The programs that counties administer to serve California’s older adult and disabled population are experiencing significant growth and it is difficult for counties to continue to meet the growing demands for these services with the existing funding that is available. For IHSS, the 2019-20 budget enacted a lowered County IHSS MOE that provides a more sustainable structure moving forward for counties to manage IHSS costs. It is vital to protect the county fiscal sustainability that was just secured for the IHSS program. In addition, it is important to ensure adequate funding for all relevant programs administered by counties that serve older adults, so that counties can best meet the needs for the growing older adult population.

We look forward to continuing to partner with the California Health and Human Services Agency and the California Department of Aging on this important endeavor. Each of our organizations may also take the opportunity to comment and provide more detailed recommendations on the specific programs that we administer and specific priorities of our members.

Thank you for your consideration.

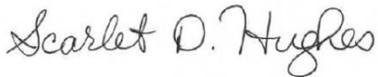
Sincerely,



Justin Garrett  
California State Association of Counties



Frank Mecca  
County Welfare Directors Association



Scarlet Hughes  
California Association of Public Administrators,  
Public Guardians, and Public Conservators



Karen Keeslar  
California Association of Public Authorities



Kelly Brooks-Lindsey  
Urban Counties of California



Tracy Rhine  
Rural County Representatives of California

cc: Kim Johnson, Director, California Department of Social Services  
Richard Figueroa, Acting Director, California Department of Health Care Services