

The In-Home Supportive Services (IHSS) Quality Assurance (QA) Initiative Stakeholders' Meeting was attended by various advocacy groups, union officials, social workers, state and county staff, and others. Attendees signed in and received a folder containing: a revised Agenda, the IHSS QA Initiative Workgroup Progress Update (April 22, 2005), the QA Initiative Workgroup Dates and Times for April through June 2005, and an April 15, 2005, draft copy of the ACIN pertaining to the Preliminary Instructions regarding County QA Activities. See Attachments 1A through 5, and the released ACIN I-24-05:

http://www.dss.cahwnet.gov/getinfo/acin05/pdf/I-24_05.pdf

Brian Koepp, Chief, Adult Programs QA Bureau (QAB), opened the meeting by welcoming attendees, including several who attended via teleconference, to the third IHSS QA Initiative Stakeholders' Meeting. He stated the focus of the meeting was to highlight the progress made by the six active workgroups implementing the QA Initiative as directed in Senate Bill (SB) 1104 and to have each of the workgroup co-chairs briefly discuss accomplishments to date and future goals.

Mr. Koepp then introduced Joseph Carlin, Acting Deputy Director of Disability and Adult Programs Division, who welcomed everyone and stated that the California Department of Social Services (CDSS) is looking into the possibility of holding future workgroup meetings at different times and locations to accommodate attendees while maintaining accessibility, toll-free teleconferencing capabilities, and interpreter availability. Mr. Carlin thanked the attendees for their participation and valuable input and reiterated that the goal of the QA Initiative is to support vulnerable Californians living independently while achieving statewide standardization of needs assessments, training for IHSS social workers, quality assurance, prevention of fraud, and program consistency statewide.

Mr. Carlin introduced Eva Lopez, Chief of the Adult Programs Branch, who announced that the IHSS QA website (<http://www.dss.cahwnet.gov/dapd/>) is now available and contains information about the QA Initiative, workgroup meeting dates and locations, meeting summaries, and handouts. Ms. Lopez also announced that the QA Bureau also has an active email address (ihss-qa@dss.ca.gov) for emailing inquiries and comments.

The meeting proceeded with the workgroup co-chairs providing their workgroups' progress.

Regulations Workgroup

Eileen Carroll, Chief, Adult Programs Operations Bureau, provided an update of the Regulations Workgroup which she co-chairs with Grace Gomes, County Welfare Directors Association (CWDA) representative. Ms. Carroll stated that the Regulations Workgroup is focusing on developing regulations in three areas identified in SB 1104: 1) QA requirements, 2) the IHSS Waiver-Plus requirements, and 3) an overall review of current IHSS regulations to ensure consistency with the new requirements.

The workgroup has approximately 60 members and includes consumers, union representatives, advocates, public authorities, and county staff. The first meeting was held February 3, 2005, at which time a workgroup charter was established setting the parameters for the workgroup and a six-month work plan was drafted. The workgroup met again on April 15, 2005, when they finalized and approved the six-month work plan, drafted a long-term plan, and reviewed an outline of the IHSS Waiver-Plus regulations. The workgroup is to be divided into three sub-committees to draft regulations for the three key areas identified, and they will bring their work back to the next meeting on June 24, 2005.

Social Worker Training Workgroup

Joan Boomer, QAB County Consultant, stated that she and Connie Bledsoe, CWDA representative, co-chair the Social Worker Training Workgroup. The workgroup includes representatives from each category of Stakeholders. The objective of the workgroup is to develop and prepare for the implementation of training of all social workers throughout the state on the assessment and authorization of services. The goal is to achieve consistency from county to county and worker to worker.

The first meeting was February 10, 2005, at which time a workgroup charter was developed and presentations were made by two training vendors: 1) California State University, Sacramento (CSUS), and 2) University of California, Davis (UCD). The workgroup met again on March 16, 2005, and it was announced that the contract was awarded to CSUS and that county training would begin in July 2005. The workgroup spent the remainder of that meeting establishing and prioritizing the training curriculum. The statewide Social Worker Training will be developed into two, two-day training modules. The workgroup will meet again June 28, 2005.

Jeannie Smalley, QA Monitoring Unit Manager, added that state staff has been collecting training information from all the counties through surveys and the four-county validation training. This information, along with input from the workgroup, will be utilized in building the training academy curriculum.

Joan Boomer added that the statewide training academy will begin in July 2005 and will go through Fall 2006. We do not have a schedule established yet, but will keep the counties apprised. The counties will coordinate the training with their respective public authority.

See Attachment 2 for comments, questions, and answers regarding this workgroup.

State/County Procedures Workgroup

The State/County Procedures Workgroup is co-chaired by Martha Bracha, QAB, and Donna Brase, CWDA representative. Brian Koepp reported on the workgroup's progress in their absence. Mr. Koepp stated that this workgroup was formed as SB 1104 requires QA activities at the state and county level with a monitoring process that involves joint efforts between the two. There have been three meetings to date.

The first meetings were held on February 15, 2005, and March 8, 2005, and the primary attendees were state and county representatives. The third meeting was held April 12, 2005, and included advocates, unions, public authorities, and consumers.

The first meeting focused on finding out what QA activities are currently in place in the counties. Because San Diego and Los Angeles Counties already have QA units in place, they each presented on their QA process and procedures. Additionally, QAB staff who formerly worked in the Evaluation and Integrity Bureau performing county case reviews and making home visits presented information regarding that process.

The second meeting focused on how to establish a QA function for each county, the QA requirements of the Independence Plus Waiver, and identifying the information counties needed to implement QA. Breakout groups were formed to discuss these issues and these groups brought back valuable information to share with the workgroup.

The third meeting in April focused on reviewing a draft All-County Information Letter (ACIN) prepared in response to county concerns about needing guidance on setting up a QA function. The ACIN was subsequently revised based on the workgroup's input and was forwarded to CWDA for input. The ACIN should be sent out in May and will give direction to counties in establishing their QA units. A breakout group discussed proposed specific county QA activities.

The state and counties have formed a real partnership to develop a process that fits all the counties, large and small, which is a challenge due to the diversity of 58 counties. The workgroup is to decide the minimum QA requirements that every county should be expected to conduct. The goal is to identify what is going on at the county level, build on that information, and make improvements. All comments and suggestions for this or any other workgroup that are emailed or telephoned to us will be forwarded to the appropriate workgroup.

Forms Workgroup

Bill Weidinger, CWDA representative co-chair for the Forms Workgroup, stated that the Central Region has been working on the development of a statewide Protective Supervision form, which will be used to determine the need for protective supervision. The form, as required in SB 1104, was developed using sample medical letters collected by the state and forwarded to the workgroup. The state and county have developed a good working relationship in this endeavor.

The first meeting was held March 25, 2005, and attendees included state and county representatives, district attorneys, public authority representatives, and a California Association of Public Authorities (CAPA) representative. We received feedback on a draft Protective Supervision form and began drafting the Provider Enrollment form with input from the Department of Health Services (DHS). The next meeting is scheduled for April 29, 2005.

See Attachment 3 for comments, questions, and answers regarding this workgroup.

Hourly Task Guidelines Workgroup

Joan Boomer stated that there are several co-chairs on this workgroup, including Julie Lopes, QA Monitoring Unit Manager, and Eric Fair, CWDA representative. There have been two meetings held February 22, 2005, and March 22, 2005. Attendees have been quite diverse and include providers, union representatives, public authorities, CAPA representatives, state and county representatives, and welfare rights advocates. This workgroup is tasked with developing and implementing time for task guidelines statewide. Decisions are being made regarding which of the 25 tasks in the IHSS program are appropriate for statewide guidelines, which tasks already have guidelines, and which tasks are not feasible for guidelines.

The workgroup is in the process of identifying and gathering information from other states, occupational therapists, physical therapists, and the medical community as to what standards they use and how they determine how much time to allocate the care that they are authorizing. The workgroup will also be talking about exceptions to the guidelines, recognizing that the needs of people with impairments vary tremendously. The guidelines have to be flexible enough to have uniformity to ensure that when a person moves from one county to another the care is at a similar level. Yet they also have to be diverse enough to meet individual needs.

Erik Fair talked about the efforts that the CWDA is undertaking to define tasks, create guidelines, and create exceptions to those guidelines. He emphasized that the objective is not to alter guidelines, but to create them. To date, Mr. Fair has met with social workers from the CWDA North, Central, and Valley-Mountain Regions on March 9, and 13, 2005. The group discussed issues raised at the workgroup's first meeting, including medical accompaniment and exceptions thereto. The group came up with a list of possible exceptions for the workgroup's consideration. Mr. Fair also met with social workers in the CWDA Southern Region on March 17, and April 12, 2005. This group focused on several categories of care within the Case Management Information and Payrolling System (CMIPS) distribution including, respiration, feeding, routine bed baths, dressing, menstrual care, bathing, oral hygiene, and grooming. The group is trying to decide what tasks and sub-tasks should be evaluated under each of the CMIPS headings and will provide a list to the workgroup for their consideration and feedback.

See Attachment 4 for comments, questions, and answers regarding this workgroup.

Fraud/Data Evaluation Workgroup

Julie Lopes, Manager for the QA Monitoring Unit, stated that the purpose of this workgroup is to complete specific activities as they relate to the prevention and detection of fraud and data evaluation. She emphasized that it is crucial to ensure that program funds are being used for the intended purpose and that QA provisions also require oversight to make sure abuses do not occur. There is a mandate to conduct an error rate study beginning this fiscal year, and there will be interagency discussions to evaluate areas to study. This process will include coordinated efforts with DHS and other state agencies to look at data matches and to conduct appropriate follow-up with

county welfare departments. Ms. Lopes added that once the data is evaluated, we will be in a better position to identify what areas we need to address, what policies need to be implemented, and which regulations need clarification. Additionally, she pointed out that development of methods for the verification of receipt of services is another important activity for the workgroup.

The workgroup had one meeting, April 7, 2005, which was attended by governmental representatives from different state agencies, county welfare departments, provider unions, district attorneys, welfare rights advocates, and consumers/providers. The provisions of SB 1104 and the applicable Welfare and Institutions and Codes sections were discussed at the meeting. The next meeting is scheduled for May 6, 2005, when the workgroup will discuss the best way to implement the legislation dealing with fraud/data evaluation. In addition to the workgroup meetings, there will be interagency sub-committees established to identify and resolve interagency roles and responsibilities. Ms. Lopes then closed by stating that we look forward to everyone's participation in implementing the fraud/data evaluation provisions.

See Attachment 5 for comments, questions, and answers regarding this workgroup.

Eva Lopez concluded the meeting by thanking all in attendance and reminding attendees that all information pertaining to the workgroups, including meeting notices, agendas, meeting summaries, and handouts, are available on the CDSS QA website. Ms. Lopez assured attendees that everyone's input is valuable and necessary in tackling this big task.

The next stakeholder meeting will be in approximately three months with notification and meeting details being distributed in the near future.

Attachment 1A
Attendees

SUMMARY OF THE IN-HOME SUPPORTIVE SERVICES QUALITY ASSURANCE
STAKEHOLDERS' MEETING

Organizer: CDSS' Adult Programs, Quality Assurance Bureau
Location: Secretary of State Auditorium, 1500 - 11th Street, Sacramento, CA 95814
Date: April 22, 2005
Time: 10:00 a.m. to 12:30 p.m.

Attending:

Joseph M. Carlin, CDSS	Eva L. Lopez, CDSS, Adult Programs
Bert Bettis, DHHS	Brian Koepp, CDSS QA
John Shesy, DHHS	Eileen Carroll, CDSS Adult Programs
Erik Fair, OC IHSS	Bill Weidinger, CCC EHSD
Susan Schwendimann, Sac Co IHSS QA	Jarrett Oddo, Sac Co QA
Katrina Eiland, CA Care	Laurie Silva, CDSS/QAB
Andy Rosoff, Senior Law Project	Susan Miller-French, NAHHCP
Ellen Martin, United Domestic Workers	Julie Lopes, CDSS QA
Steve Ferguson, Addus Health Care	Joan Boomer, CDSS QA
Sandra Campbell, Adv. Committee	Floralma Valencia, Sacramento Co
Charlene Loche, CDDS	Bob L. Benson, SDCAN
Norberto Laboy-Brauer	Anastasia Dodson, Senate Budget Cmte
Marty Omoto, CDCAN	Josephine R. DeLeon, DHS
Rudy Hicks, DOR	Natalia Efimova, IHSS
Jim Newton, Sac Co IHSS Fraud Unit	Jessica Turner, IHSS
Jeannie Smalley, CDSS QA	Alisna Sanders, CAHSA
Linda Williams, CDSS QA	Diana Christensen, HAS-San Francisco
Andrea Allgood, CDSS QA	Sharon Rehm, Sacramento Co
Kevin Aslanian, CUWRO	Bernadette Lynch, Sac Co IHSS
Ajna Glisic, Sac Co IHSS	Yvette Perez, IHSS Sac Co
Judy Griffin, Placer Co	Todd Thao, Sac Co
Melody McInturf, Sac Co IHSS QA	Rafael Espinoza, UHW-SEIU
Bill Powers, CARA	Charissa S. Miguelino, CDSS
Jan Howland, CDSS	Cyndee Forbes, IHSS
Judy Leavell, IHSS	Debra Garcia, DHSA IHSS
Guy Klopp, IHSS QA/QI	Brian Pyne, IHSS
Margo Shearer, IHSS-DHHS	Annette Hettuer, IHSS-DHHS
Karen Keeslar, CAPA	Sujei Gonzalez, PG&A
Larry Newman, DOJ, BMFEA	Kathleen Schwartz, Sac Co DHHS
Eldon Luce, Placer Co	Anthony Lewis, CDOJ
Lawnedia McAllister, Sac Co IHSS	Ana Bravo, Sac Co DA
Kevin Gaines, CDSS	Diana Kacic, CWDA
Tracy Pope, PG & A	Betty Perry, OWL
Eileen Richey, ARCA	Fay Mikiska, IHSS Advisory Committee
Megan Elliott, San Francisco Co	Lucille Roberts, OWL, CDR, GP
Tamara Reilly, SEIU	Pamela Barnes, CDSS QA

Attachment 2 Social Worker Training Workgroup

Question: Is the validation training open to other Stakeholders? We can not hold social workers accountable if we do not know how they are trained.

Answer: The statute specifies that the training is for social workers and public authorities. The validation training was done to gather county input on their training needs. The validation training PowerPoint presentation will be available for viewing on our internet site.

Question: What is “validation” training?

Answer: “Validation” is just the word that was chosen to describe whether the focused assessment training provided in the volunteer counties had any impact on those counties, prior to implementing the training academy. We also wanted to bring information back from the county trainings, including comments, suggestions, and best practices.

Question: What are the four volunteer counties?

Answer: Sacramento, Tehama, Kern, and Ventura.

Question: Can committee members in the public authorities go to those meetings?

Answer: Yes. We had several public authorities attend the trainings. The training academy starts in July and will be open to all counties, public authorities, administrative law judges, and others as identified in the SB 1104.

Question: Are there any medical people involved in the validation training?

Answer: Numerous public health nurses attended the validation training in Sacramento County.

Question: I think the Stakeholders should be involved in the training to remove the suspicion that the Initiative is meant to limit services or reduce hours because of the overall cuts being proposed by the Administration. Could advocates request the legislature to make a change in statute that would allow Stakeholders and other advocacy groups to get the training?

Answer: What we need to look at would be the number of people who would get training, what that would do to the cost, and if we have the amount of money budgeted for it. I understand there is interest, and you would like to know what training is being presented. We will seriously look at your request. I can not give you an answer right now.

Question: Are you budgeted for a certain amount of money to do the training?

Answer: Yes. We are currently looking at training about 2,000 to 2,500 people statewide over the next year.

Question: Are you going to do the training prior to the enactment of the Waiver-Plus Program?

Answer: The Waiver-Plus Program is a separate program from the normal Personal Care Service Program (PCSP). The training will encompass all training for the social workers, including the Waiver-Plus Program.

Comment: You are working on altering the guidelines for assessment of hours. You are working on how to do assessments. Those have to conform to the law, and whatever practices you are planning on doing. I am not quite sure how much the law will overlap into Supplemental Security Income (SSI) cases and not just PCSP cases. I still do not understand how you expend these resources and the amount of time the county is going to spend prior to completing all the work these people are reporting on.

Answer: We already have certain regulations in place and that is what we are all working with today. These are the core principles today. The bill is very clear that we need to initiate training and that is what we are doing given what we have today to work with. As new regulations are developed, the training will be modified accordingly in the second module that will roll out at the end of the year or early next year.

Question: How often are these Stakeholders meetings held?

Answer: They were scheduled to be periodic, approximately every three months. We will put out a schedule, hopefully, well ahead of time, and let you know when the next meeting will take place.

Comment: As an IHSS recipient, I think the social workers have done a pretty good job. I strongly feel that the providers, including family members, need training.

Comment: I think the providers and the consumers who hire the providers need training. Consumers need to be aware of what is expected of their providers.

Comment: In order to properly assess, I think you are going to need to classify the different types of disabilities.

Answer: As we are moving forward with CSUS, we are looking at the whole issue of assessments and how that impacts different folks, at different levels. Joan Boomer has been working hard on identifying specific areas that we need to bring to CSUS' attention before it gets rolled out. CSUS has been working on a Real Choice Grant to provide training to recipients and providers.

Question: What is the telephone number to call to access these meetings?

Answer: If you do not receive emailed meeting notices, call us at (916) 229-4000. Ask for the QAB, and they will connect you.

Attachment 3 Forms Workgroup

Question: What is protective supervision? Is this for someone who may have dementia or cannot otherwise be left alone?

Answer: Protective supervision is defined in regulations as being available to monitor the behavior of non-self-directing, confused, mentally impaired or mentally ill persons.

Question: Wouldn't that require a provider to work a lot of hours? How does that work?

Answer: There are limitations on how many hours are authorized in the program. The maximum is 283 per month. Hours are authorized based on the need and the resources available to the consumer.

Question: Is the Forms Workgroup developing a statewide Provider Enrollment form? I suggest having legal counsel participate so that the form can be designed to hold providers accountable for their actions.

Answer: It will get a legal review, absolutely.

Attachment 4 Hourly Task Guidelines

Question: Providers do not always work at the same speed. Are you going to include a range of times?

Answer: Yes. However, existing regulations dealing with time for task must be followed.

Question: It is hard to find a provider. If a provider's hours are capped, the consumer may have to have more than one provider.

Answer: If you are talking about an overall cap that seems insufficient, that is a legislative issue and beyond the scope of anything we can do administratively within the group or aside the group. If you are talking about a cap on hours authorized for an individual's tasks, the workgroup is not intending to set a cap. The workgroup is intending to set guidelines and to identify reasons to make exceptions above or below that guideline.

Question: How will you obtain input from consumers and providers?

Answer: This will be discussed at the workgroup's next meeting. The group did make the strong recommendation that there needed to be more input from providers and consumers, through surveys, focus groups, and the like. We are going to put together focus groups with consumers and providers to talk about needs and how long it takes to do various functions. To be as representative as possible, we will randomly select people from areas throughout the state to make up the focus groups.

Question: What is the state's view on those counties who have already adopted their own time for task guidelines?

Answer: This is supposed to be a statewide endeavor, not county by county. When guidelines are established they will be distributed to all counties.

Question: One of the counties in my region adopted time for task guidelines about a year and a half ago resulting in a substantial cut in hours across the board. When will the statewide guidelines be available? It is also a training issue, if you are training social workers now, they need to be trained not to be using unauthorized time for task guidelines. Another concern I have is if we are going to be looking at time for task maybe we should figure out an appropriate time for an assessment. An assessment should take an hour or so to make the counties accountable.

Answer: The statutory requirement is that we have regulations in place by June 30, 2006. We are working on establishing guidelines before that so we can work through the process before sending the guidelines to the regulation committee. Then there is a regulatory process for proposed regulations, part of which is the public hearings, which will be a venue for public testimony once they are written.

Question: A process that starts out with a requirement that there be a 10 percent cut in funds for this program leaves one in the position of having to apply a precept conclusion. Does anyone know where this Administration is on the proposed cuts to the Medicaid program in Washington? Is the Governor doing anything to stop those cuts?

Answer: Regarding the Medicaid cuts, we can not make any comments about that. You need to direct your comments to the Department of Health Services. Regarding starting out with a 10 percent cut, what the Governor's Budget suggested with regard to the QA Initiative was that there was an expectation that with standardized training and more standardization statewide, there may be a 10 percent savings. That is not a requirement of this process. What we are looking to do is to have a standard process that is fair to consumers around the state. A process that ultimately is defensible and responsible, rather than a program that is growing and running on its own without a lot of oversight as it has been. When the Administration needs to put money into the program or the legislature needs to authorize it, they need to have confidence that it is a program that is being run appropriately.

Comment: There is a need for families to volunteer to take care of their own without expecting money from the state. It is not fair to taxpayers who do not fall under the poverty level. I think that if we are not careful, we are going to be creating commodities out of consumers. I see it happening all the time. The Adult Protective Services (APS) reports that there is 12 percent abuse among IHSS workers, mostly by family members. They do not care for them properly because they are not trained, they probably have some family dynamics that are not resolved, and they are a source of income. I think that is something we need to seriously look at.

Comment: I agree providers need training. It should be mandatory. Especially when dealing with long-term care consumers because they do not get better.

Comment: One of the biggest concerns we have in terms of investigating IHSS fraud is in relation to consumers with family member providers using it as a source of income but not providing the services. The consumer is unlikely to make a statement which, in turn, inhibits an investigation.

Answer: Sometimes consumers hire family members who do not meet their needs and place them at risk and APS has to be involved. Sometimes there is the assumption that family members are going to volunteer to do things. Sometimes there are very hard working family members who are doing far more than the program provides, and sometimes the needs are under authorized.

Attachment 5
Fraud/Data Evaluation Workgroup

Question: I think the counties received 110 positions to implement QA . I understand that some counties may be using those positions to buy more district attorney staff. What is the state's view on this?

Answer: When the funds were provided to the counties, there was no clear direction given. Counties have had flexibility over the years in many of our programs, specifically this one, to do what they felt was right for their community and consumers. We will have to have some discussions in terms of how the funds are to be used.

Question: How can we access SB 1104 and read it in totality?

Answer: Through our website: <http://www.dss.cahwnet.gov/dapd>.