



California Elder and Disability Justice Coordinating Council (EDJCC)

10/17/2023 | 1:00pm – 4:00pm



Meeting Logistics

- American Sign Language Interpreting Provided
- Closed Captioning Available via Zoom
- Meeting slides, video recording & transcript will be posted to the [CalHHS Agency's MPA webpage](#)
- Please rename yourself in Zoom by right clicking on your video and select "rename."



Public Comment

- **Public comments during meeting, as on agenda**
- Attendees joining by **phone**, press *9 on your dial pad to join line. The moderator will announce the last 4 digits of your phone number and will unmute your line.
- Attendees joining by **webinar (Zoom)**, click the *raise hand* button to join line. The moderator will announce your name or your last 4 digits of your phone number and will unmute your line.
- For additional public comment or for meeting feedback email Engage@aging.ca.gov.

Council Purpose

The goal of the Elder and Disability Justice Coordinating Council is to increase coordination and develop recommendations to prevent and address the abuse, neglect, exploitation, and fraud perpetrated against older adults and adults with disabilities.

Equity Guiding Principles

We recognize that past, current interventions, and services to prevent mistreatment have had negative consequences for some victims, families, and communities as the result of systemic discrimination and biases. To counter these negative impacts and to ensure equity and inclusion moving forward, we are committed to letting the following principles guide all aspects of our work in planning, coordination, and program development.

Equity Guiding Principles

1. We recognize that all adults deserve to live free from abuse, neglect, and exploitation.
2. We acknowledge the existence of systemic racism, discrimination and negative impacts. In order to combat its impacts, we must center equity at all stages of our council's work.
3. Centering around equity does not just mean creating equitable solutions for all older adults and adults living with disabilities but also recognizing that implicit bias exists within all of us. We are committed as a group to acknowledge and explore biases while doing the work of this council.
4. We acknowledge that while older adults and adults living with disabilities have many overlapping interests, they are distinct communities, and any policies that are observed or recommended by this council should examine impacts to each community.
5. We recognize the importance of hearing directly from older adults and adults living with disabilities, their lived experiences should always be centered as we move forward with the work of this council.

Today's Agenda

1:00 Welcome, Opening Remarks

1:10 Building California's No Wrong Door System (NWD)

1:20 Elder and Disability Justice Coordinating Council Workgroup Updates

1:50 Overview of the Office of the Long-Term Care Patient Representative

2:20 – 2:30 Break

2:30 California Department of Emergency Services (CalOES)

3:10 State Public Guardian Liaison

3:40 Public Comment

3:55 Closing & Next steps



Welcome

Susan DeMarois

Director, California Department of Aging
EDJCC State Co-Chair

Eric Dowdy

Alzheimer's Association
EDJCC Stakeholder Co-Chair



Building California's No Wrong Door System

CA2030

ADRC Expansion

EDJCC Workgroup Updates

Vivianne Mbaku, Director, Justice in Aging
Legal Services (Chair)

Jim Treggiari, APS Administrator, California Department of Social Services
Adult Protective Services (Chair)

Akiles Ceron, San Francisco Human Services Agency
Adult Protective Services (Co-Chair)

Bertha Hayden, Directing Attorney, Bet Tzedek
Conservatorship (Chair)

Committee Questions and Discussion



Susan Rodrigues

Assistant Director, Office of the Long-Term Care
Patient Representative



OFFICE OF THE LONG-TERM CARE PATIENT REPRESENTATIVE (OLTCPR)

Overview

California Elder and Disability Justice Coordinating Council
(EDJCC)
October 2023

The Long-Term Care Patient Representative Program (LTCPRP) – Introduction



A new program within the California Department of Aging (CDA) established by Welfare and Institutions Code (WIC) 9260 that

- Provides trained public patient representatives (PPRs) to participate in interdisciplinary team (IDT) reviews held pursuant to Health and Safety Code (HSC) section 1418.8
- Serves specified residents of skilled nursing facilities and intermediate care facilities

Effective January 27, 2023

HSC 1418.8 - New Requirements

Facilities must:

- 1. Include a patient representative** when they convene an IDT to make medical decisions requiring informed consent for residents who lack capacity and have no legal surrogate.
- 2. Provide notices** containing specified information both before and after an IDT review to the resident who is the subject of the IDT and to the resident's patient representative.
- 3. Provide specified data** to the CDA, Office of the Long- Term Care Patient Representative as required.

Criteria for Requesting for a PPR

- ✓ Facility received a Physician's order/prescription for a medical intervention/treatment that requires informed consent before being administered, ***and***
- ✓ Attending physician has determined that the resident lacks capacity to provide informed consent, ***and***
- ✓ Resident does not have a legal decision maker, ***and***
- ✓ Resident does not have a family member/friend available and willing to participate in IDT review

The Public Patient Representative (PPR)

Eligibility/Certification Requirements

Obtain a criminal record clearance.

Have no conflicts of interest.

Complete the initial training and continuing education requirements.

Agree to follow mandated reporting responsibilities.

Other requirements.

Public Patient Representative (PPR)– Role and Responsibilities



- **Role:** Represent residents on IDTs convened pursuant to HSC 1418.8
- **Responsibilities:**
 - Confirm criteria are met for IDT to convene and for assignment of a PPR
 - Meet and, if possible, interview resident prior to IDT meeting
 - Review resident's medical and clinical records to prepare for IDT review
 - Review facility's policies and procedures related to the IDT process as required by AFL 23.18
 - Participate in the IDT review, considering the factors required by HSC 1418.8
 - Articulate resident's preferences, if known, or best approximation of preferences
 - *Additional responsibilities* – mandated reporting and providing contact information to appropriate legal services

What is the scope of the responsibility of the PPR?

WIC 9270

- (a) PPR shall not participate in an IDT review of a decision that would directly and inexorably lead to death. Includes disconnecting:
- Ventilator assisting with breathing
 - Feeding tube
- (b) PPR may participate in IDT review to create or revise:
- Physician Orders for Life Sustaining Treatment
 - Do Not Resuscitate (DNR) orders
 - Comfort care orders
 - Elections of hospice care
 - Psychotropic medication orders

Not the role of the PPR > Whose then?

Serve as decision-maker for resident's:

- > Fiduciary matters
- > Admission
- > Placement

- Conservator/guardian
- Representative payee
- Power of attorney
- AHCD agent
- Family/Friend

Serve as Case Manager

- Conservator/guardian
- Representative of other agencies

Provide community resource referral to residents and their families

- Facility social worker

Investigate elder or dependent adult abuse and/or neglect; Resolve care issues

- Long-Term Care Ombudsman
- CDPH
- Disability Rights California
- Other investigative or enforcement agencies

OLTCPR Webpage

https://aging.ca.gov/Providers_and_Partners/Office_of_the_Long-Term_Care_Patient_Representative/

The screenshot shows the official website of the California Department of Aging's Office of the Long-Term Care Patient Representative. The page features a navigation bar with links to About Us, Providers & Partners, Careers with CDA, Newsroom, Contact Us, and Search. A sidebar on the left contains 'Popular Links' and 'Resources'. The main content area is titled 'The Office of the Long-Term Care Patient Representative' and includes a background section explaining the program's purpose. Below this is a decision flowchart titled 'Do We Need to Request a Public Patient Representative?' which guides users through the process based on whether a resident has a medical decision-making capacity, if a physician has determined the resident lacks capacity, and if the resident has a legal decision-maker. The flowchart concludes with a 'Yes/No' outcome and a link to request a representative. Further down, the 'Identifying Patient Representatives' section explains the requirements for identifying a representative and provides instructions on how to request access to the CAPRS system. A table lists designated public patient representatives for various counties, including the Office of the Long-Term Care Patient Representative, Los Angeles County Department of Mental Health, and Alameda County. The page also includes a contact section and a footer with various links and social media icons.

California Department of AGING

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About Us | Providers & Partners | Careers with CDA | Newsroom | Contact Us | Search

Popular Links

- Programs and Services
- Where To Call For Local Services
- Find Services in My County
- Helpful Tools & Tips
- Find Licensed Services

Resources

- CDA Forms
- Information Security
- Program Manual

Home : Providers & Partners : Office of the Long-Term Care Patient Representative

The Office of the Long-Term Care Patient Representative

The Office of the Long-Term Care Patient Representative (OLTCPR), a new program within the California Department of Aging (CDA), provides trained representatives for specified long-term care residents who may need medical treatment but lack the capacity to make health care decisions and have no legal surrogate authorized to make decisions on their behalf.

Background

Under state law (Health and Safety Code section 4148.8), skilled nursing and Intermediate Care Facilities may convene an interdisciplinary team to make medical decisions for residents who lack capacity and have no legal surrogate. These teams include the resident's physician, a registered nurse responsible for the resident's care, and other appropriate staff. In the past, the teams also sometimes included patient representatives, but this was not required. As the result of a court case, skilled nursing and Intermediate Care Facilities will be required to include a patient representative when they convene an interdisciplinary team. This new requirement became effective January 17, 2022.

Do We Need to Request a Public Patient Representative?

Did the facility receive an order for a medical decision-making assessment for a resident?
Yes / No

Does the medical intervention/treatment require informed consent?
Yes / No

Has a physician determined that the resident lacks capacity to provide informed consent?
Yes / No

Does the resident lack a legal decision-maker or family member who can participate in the DCM request?
Yes / No

If your answer is:
That all assessment above = Facility shall submit a Request for a Public Patient Representative
That all assessment above = Facility shall submit a Request for a Public Patient Representative

Identifying Patient Representatives

Under the new requirements, facilities are responsible for identifying a friend, relative, or someone else to serve as a patient representative when an interdisciplinary team is convened. If the facility is unable to identify a representative, the OLTCPR will provide a public patient representative who has completed required training and passed a criminal background check.

To request a public patient representative, click the California Patient Representative Information System (CAPRS) button:

CAPRS

You must be registered to access CAPRS. To request access to CAPRS, please complete the CAPRS User Action Required Form and submit it via email to the Office of the Patient Representative at OPR@aging.ca.gov.

Designated Public Patient Representatives	Coverage Area
Office of the Long-Term Care Patient Representative California Department of Aging 2860 Gateway Blvd, Ste. 200 Sacramento, CA 95833 (916) 800-5000 OPR@aging.ca.gov	All counties, with the exception of those below
Los Angeles County Department of Mental Health 6720 Wilshire Assessment Division Chief 250 S. Vermont Ave. 10th Fl. Los Angeles, CA 90007 (213) 691-5115 geriatric@dmh.lacounty.gov	Los Angeles, Riverside, San Bernardino Counties
Alameda County Nolanda Whittington 3756 Santa Rita Drive, Suite 200 Oakland, CA 94608 (510) 218-8100 alameda@alamedafriends.org	Orange County

Contact

For questions about the new program, email OPR@aging.ca.gov or call (916) 800-5000.

FAQs | **Forms** | **Policies**

Data and Reports | **CAPRS** | **Training and Resources**

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Questions & Answers





Contact: OPR@aging.ca.gov

Thank you!



BREAK
(10 minutes)



Cal OES

GOVERNOR'S OFFICE
OF EMERGENCY SERVICES

Leigh Bills, MSW
Victim Services Branch Chief
Leigh.Bills@CalOES.ca.gov

VSB MISSION



To provide financial and technical assistance and support to victim services providers to ensure all victims/survivors in California receive the services they need

- Create programs that are trauma-informed and victim/survivor-centered
- Provide timely and consistent technical assistance to Subrecipients
- Ensure California complies with all federal and state requirements

VSB PROGRAMS (FY 2022-23)



- 80 Programs
- 1200 Grant Subawards
 - 71.6% Non-Governmental Organizations
 - 24.7% Local Governmental Agencies
 - 2.1% Tribal Organizations
 - 1.6% State Agencies

VSB Funds Administration

27 Open Federal Awards (Grants)

12 Unique Federal Grant Programs

18 State Fund Sources

(e.g., General Fund, Penalty Assessment, Special Fund)

Open Funding of More than \$1.3 Billion

Federal Grants Received & Administered

Children's Justice Act (CJA) Grants to States Program

Family Violence Prevention & Services Grants to States Program

Services*Training*Officers*Prosecutors (STOP) Violence Against Women Formula Grant Program

Sexual Assault Services Formula Program

Victims of Crime Act (VOCA) Victim Assistance Formula Grant Program



Post-Conviction DNA Testing Assistance Program

Paul Coverdell Forensic Science Improvement Act Program

John R. Justice (JRJ) Program



CRIME VICTIM FUND

VICTIMS OF CRIME ACT (VOCA) VICTIM
ASSISTANCE FORMULA GRANT PROGRAM

Crime Victim Fund

- Created in 1984 as part of the VOCA
- Supported with federal criminal fines and penalties
- Supports a variety of programs (e.g., CJA, **VOCA Victim Assistance Formula Grant Program**, Anti-terrorism Emergency Reserve, etc.)

Crime Victim Fund CAP

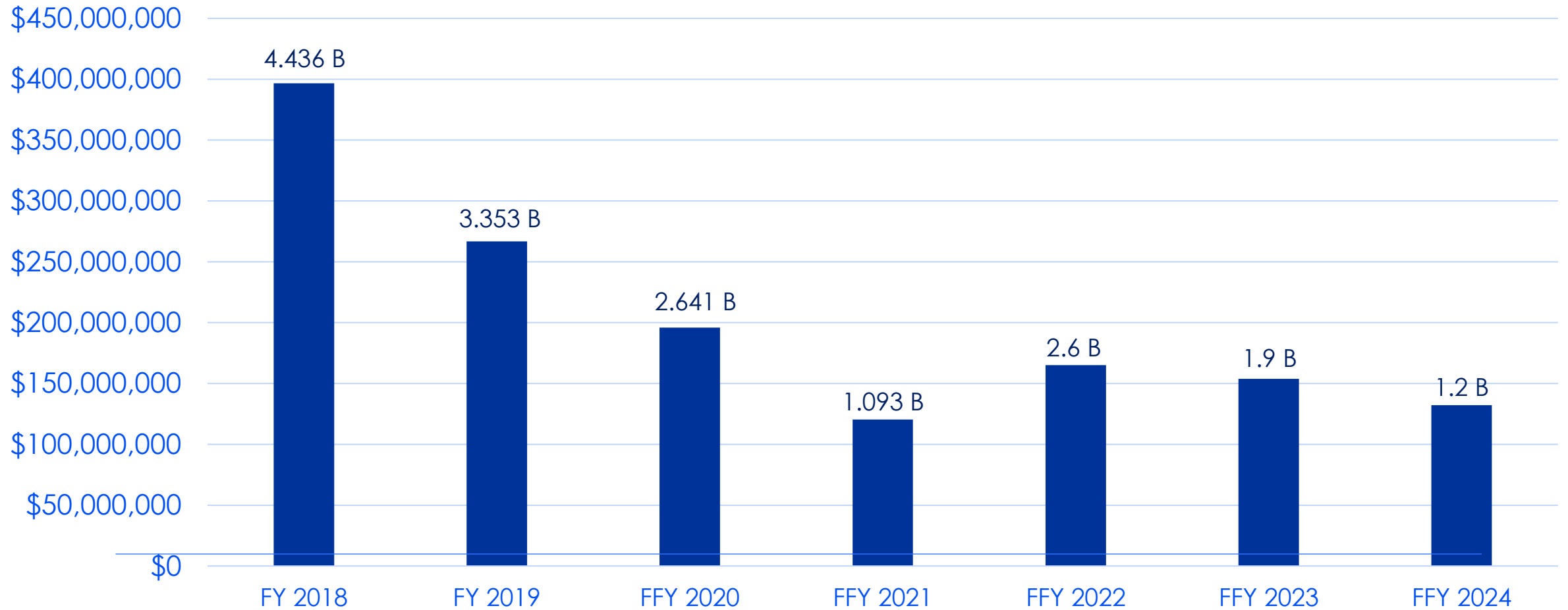
Crime Victim
Fund (CVF)
Annual Cap
fluctuates and is
set by Congress

Year	CVF Annual Cap
2013	\$730 million
2014	\$745 million
2015	\$2.361 billion
2016	\$2.653 billion
2017	\$2.237 billion
2018	\$4.436 billion
2019	\$3.353 billion
2020	\$2.641 billion
2021	\$1.093 billion
2022	\$2.6 billion
2023	\$1.9 billion
2024	\$1.2 billion*

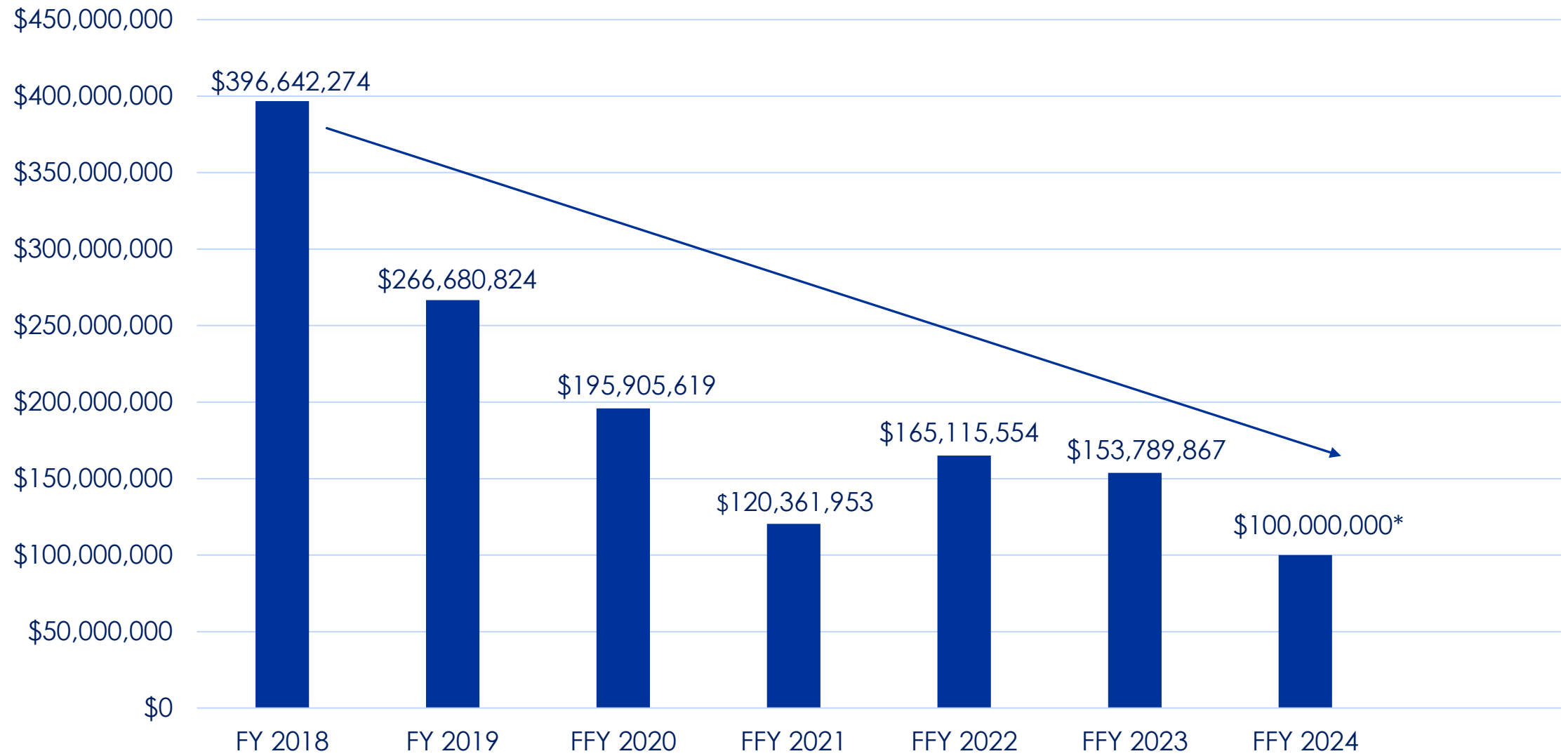


*Projected Cap





Crime Victim Fund CAP



*Current Estimate



Programs

Elder Abuse Program

The purpose of the Program is to enhance the safety of elder and dependent adult victims/survivors of crime by providing direct services to victims/survivors and bridging the gap between elder justice service providers and victim/survivor service providers.



Elder Abuse Program FY 2023-24 Request for Proposal

Released: September 28, 2023

Due: November 17, 2023

Maximum Allocation: \$217,444

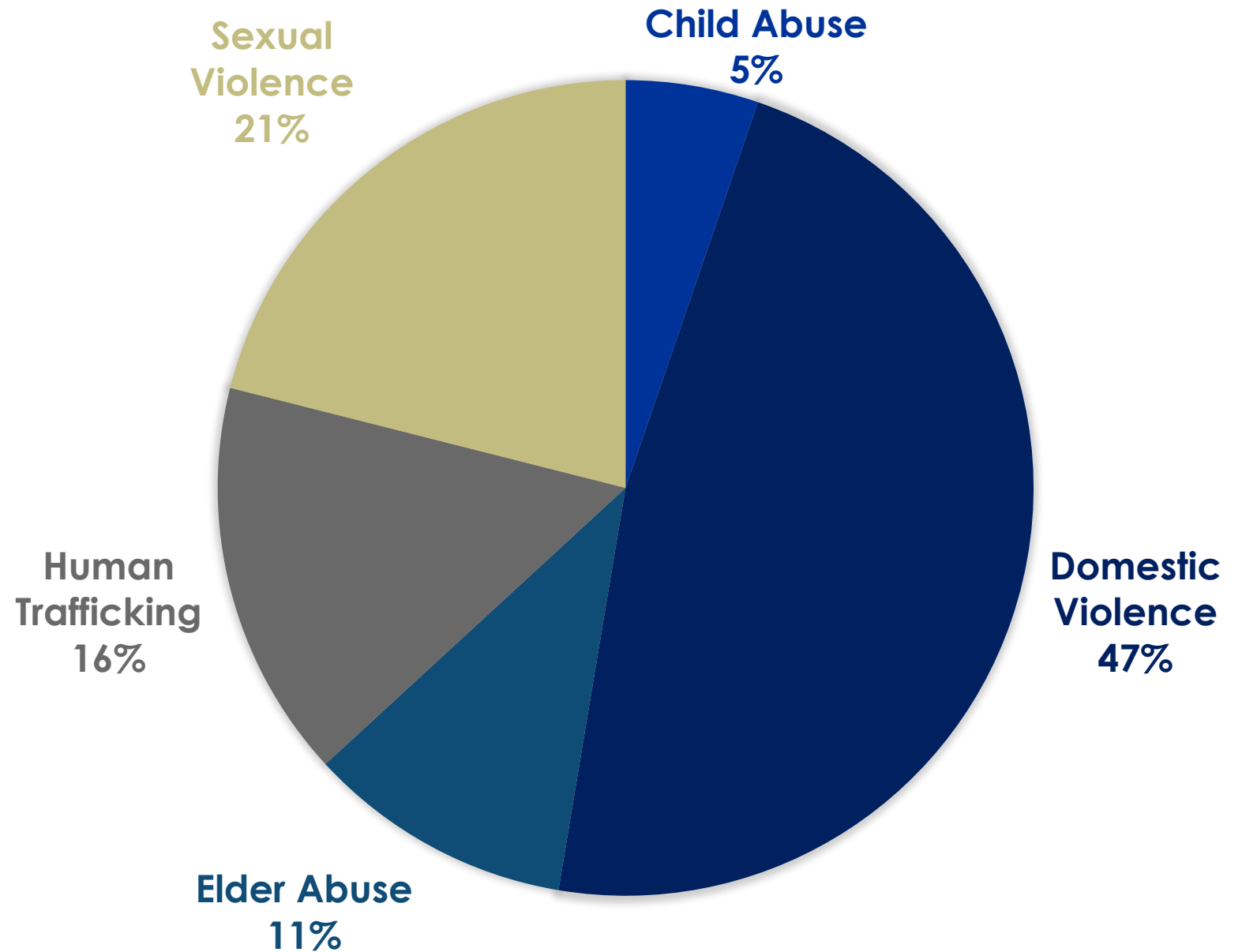


Legal Assistance Program

The purpose of the Program is to increase the availability of free comprehensive civil and criminal legal assistance needed to effectively aid adult and youth victims/survivors of crime who are seeking relief in legal matters related to that crime. Funds may not be used to provide criminal defense services.

Legal Assistance Program

Next Competitive Request for Proposal – Fiscal Year 2027-28

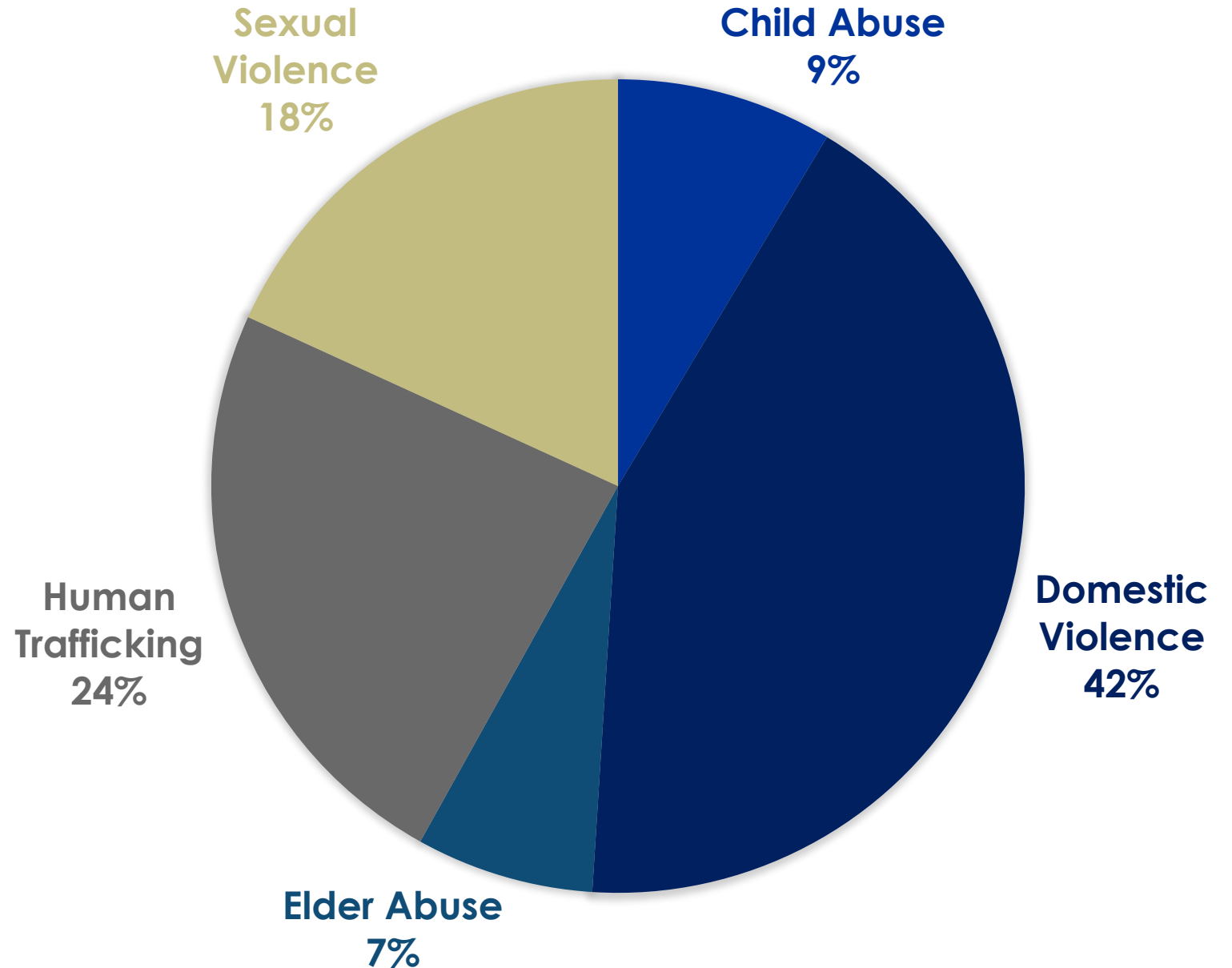


Specialized Emergency Housing Program

The purpose of the Program is to expand emergency shelter/emergency housing assistance and provide supportive services for victims/survivors of crime with specialized needs (e.g., elderly, youth, men, disabled, LGBTQIA+, non-English speaking, culturally or religiously marginalized, etc.) who cannot be served through a traditional shelter.

Specialized Emergency Housing Program

Next Competitive
Request for
Proposal – Fiscal
Year 2027-28

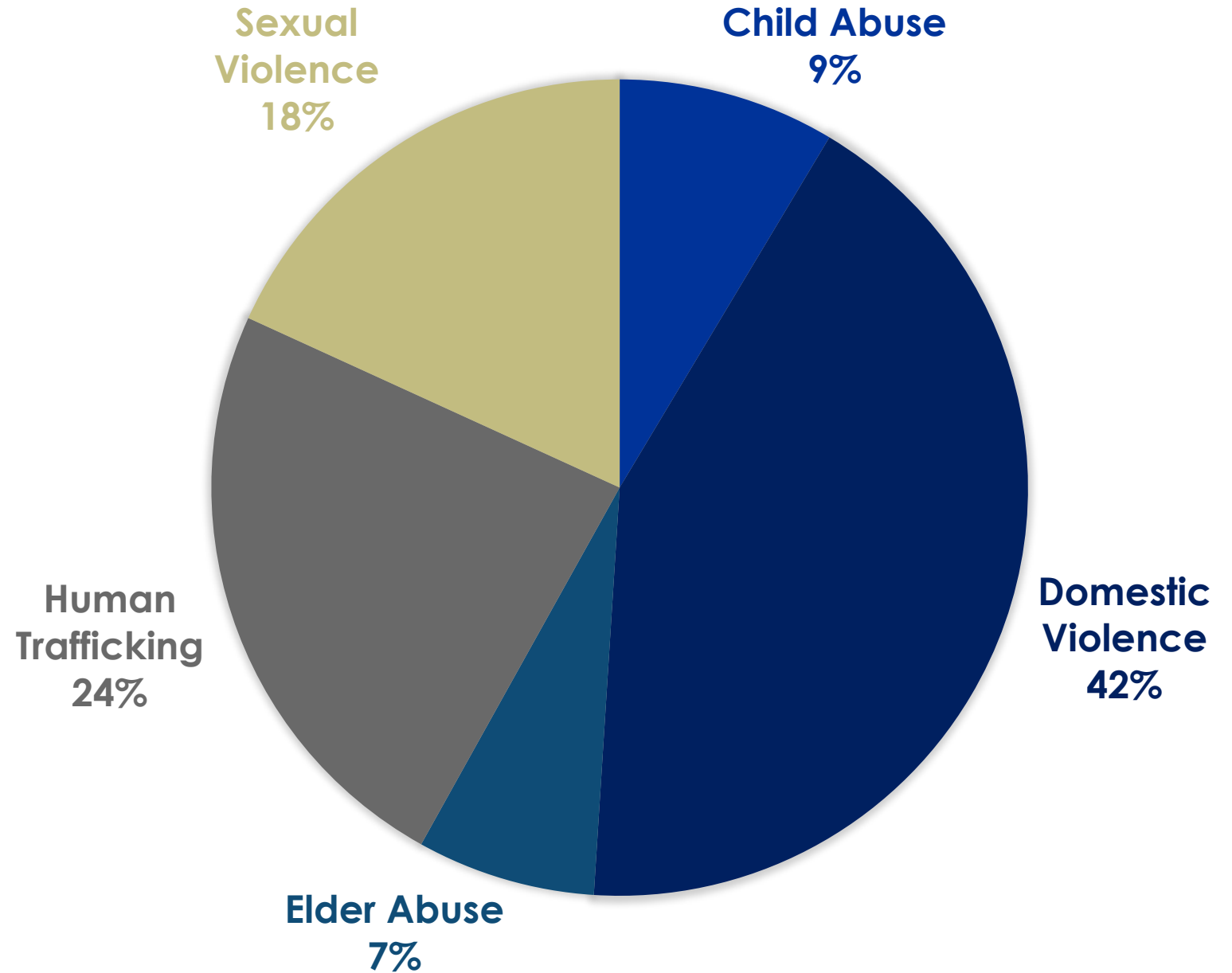


Unserved/ Underserved Victim Advocacy & Outreach Program



The purpose of the Program is to increase access to culturally appropriate services for unserved/underserved victims/survivors of crime.



Unserved/ Underserved Victim Advocacy & Outreach Program Next Competitive Request for Proposal – Fiscal Year 2026-27



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Protection Grant Programs, Memos,
and Reports

Victim Services

Support to Victim Service providers.

Grants Processing

Victim Services Grants Processing
and Payments, and Homeland
Security Grant Processing

Grants Monitoring

Fiscal and Administrative oversight of
grant subawards.

Grants Rules & Regulations

Requirements, consistency, and
guidance.

**Community Resiliency & Listos
Grants**

Emergency Operations Center (EOC),
Listos California Grant, and
Community Power Resiliency
Programs



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Email Notifications: Want to be notified immediately via email when a new Victim Service Grant RFP funding opportunity is released? [Join our mailing list.](#)

[Get funding for Hazard Mitigation projects here.](#)



[2023-24 Human Trafficking Advocate \(HA\) Program RFP](#)

Friday, September 29, 2023 | [Victim/Witness Programs](#)

Due Date: 11/27/2023

Amount: \$147,000.00

[2023-24 Elder Abuse \(XE\) Program RFP](#)

Thursday, September 28, 2023 | [Underserved Victims Programs](#)

Due Date: 11/17/2023

Amount: \$217,444.00

[2023-24 Resilience and Emergency Ambassador Deployment \(RD\) Program RFA](#)

Tuesday, September 5, 2023 | [Emergency Management Programs](#)

Due Date: 10/05/2023

Amount: \$6,650,000.00

Grant Announcements By Type

[RFA](#) | [RFP](#)

Grant Announcements By Category

[California State Nonprofit Security Grant Program](#)

[Children's Programs](#)

[Criminal Justice Programs](#)

[Domestic Violence Programs](#)

[Emergency Management Programs](#)



Questions?





2023 Public Guardian Survey

Regina Wright, State Public Guardian Liaison

E-mail: regina.wright@aging.ca.gov

Presented to the California Elder and Disability Justice Coordinating Council on October 17, 2023.

State Public Guardian Liaison

- Position created in the California Department of Aging (CDA)'s 2021-22 Budget Change Proposal for [Master Plan for Aging Implementation](#).
- This position serves as CDA's liaison with county public guardian programs and conducts research on **probate conservatorship** to formulate strategies to improve the quality of and access to probate conservatorships statewide with the goal of protecting vulnerable individuals from abuse, neglect, exploitation, and self-neglect.
- Position filled in November 2022.

Definitions

Probate Conservatorship is a legal process in which one person (the **Conservator**) petitions the probate court to care for another person (the **Conservatee**) because they can no longer care for themselves and/or manage their own financial affairs. The most common type of individual in a probate conservatorship is an **older adult with dementia**.

This is a different type of conservatorship from **LPS Conservatorship** which is another legal process when a probate court determines that an individual is unable to provide food, clothing and shelter for themselves due to a **mental health disorder**.

Public Guardian

The **Public Guardian** is a county program that can administer a probate conservatorship if there are no family or friends that are able and willing to serve as the conservator.

This is considered an option of last resort and is only pursued after due diligence is performed to identify less restrictive alternatives.

2023 Public Guardian Survey

- The **2023 Public Guardian Survey** was conducted May – June 2023, using Survey Monkey and focused only on probate conservatorship.
- **57 counties** completed the survey (all 58 provided input).
- San Benito is the only county that does not have a public guardian program for probate conservatorship.
- Contact information for the county public guardians was provided by the California State Association of Public Administrators, Public Guardians and Public Conservators.

Where are the largest sources of referrals to the Public Guardian statewide for probate conservatorship?

#1: Adult Protective Services

#2: Hospitals

#3: Skilled Nursing Facilities

#4: Probate Court

2023 Public Guardian Survey (Slide 3)

County public guardian programs reported facing these difficulties:

- **96%** experience difficulties finding appropriate placement for probate conservatees.
- **89%** experience difficulties with funding.
- **66%** experience difficulties with staffing.

2023 Public Guardian Survey (Slide 4)

Lack of Placement Options

- Clients with behavioral health issues; clients with traumatic brain Injuries; clients with criminal issues; clients who have violent and aggressive tendencies; access to affordable assisted living facilities; facilities that offer dementia care; lack of bed availability; having to place clients far away; and lack of emergency placement options.

Lack of Funding

- Clients who lack financial resources; and clients that have estates that cannot afford mortgage or insurance.

Lack of Staffing

- Recruiting and retaining qualified professionals; increase in referrals resulting in high caseloads; and lack of staff that can assist with property management.

Lack of Support and Partnerships (including existing under resourced partners)

- Lack of support from Board of Supervisors and County Administrative Officer; issues with banks/financial institutions; issues with accounting processes; difficulty obtaining capacity declarations; doctors unwilling to testify in court; issues with county counsel staffing; probate court backlog; and no direct guidance by the State on policies and procedures.

Lack of Education

- Lack of education on what the Public Guardian does; and more education needed on how to provide complete referral packets to the Public Guardian.

2023 Public Guardian Interviews

53 interviews were conducted with county public guardian programs in **July - September 2023** as a follow up to the 2023 Public Guardian Survey.

The results of these interviews will be forthcoming.

Committee Questions and Discussion

Public Comment

Time is reserved on the meeting agenda for public comments to the committee.
Two (2) minutes is allocated for each public comment.



Attendees joining by webinar (Zoom), please select the raise hand icon. The moderator will announce your name and will unmute your line.



Attendees joining by phone, press *9 on your dial pad to “raise your hand.” The moderator will announce the last 4 digits of your phone number and will unmute your line.

For additional public comments, email EngAGE@aging.ca.gov

Closing Remarks and Next Steps

Susan DeMarois
Director, California Department of
Aging
EDJCC State Co-Chair

Eric Dowdy, Alzheimer's Association
EDJCC Stakeholder Co-Chair



2024 EDJCC Committee Meeting Dates Coming Soon!

Recording, Slides, and Transcripts: [CalHHS EDJCC webpage](#)

Contact: Engage@aging.ca.gov