



County of Santa Cruz

IN-HOME SUPPORTIVE SERVICES PUBLIC AUTHORITY
500 Westridge Drive, Watsonville, CA; P.O. Box 1300, Santa Cruz, CA 95061
(831) 454-4036 FAX: (831) 763-8906

Notice of Public Meeting and Agenda

IHSS Advisory Commission

Date: Friday, January 24, 2025
Time: 1:00PM to 3:00PM
Location: 1400 Emeline AVE, Building K, Room 206. Santa Cruz, CA

The use of facemasks is recommended for all attendees of the IHSS Advisory Commission meeting.

Agenda

1. Call to Order
2. Roll Call
3. Agenda Review
4. Public Comment: *Anyone wishing to address the commission on any item within the jurisdiction of the Commission and not listed on the agenda may do so at this time. Comments are limited to three (3) minutes in duration.*
5. Consent Agenda
 - a. Approval of Meeting Minutes
 - i. October 25, 2024, Meeting.....Page 3
 - b. Commission Vacancies
 - i. Two (2) – Consumer Representatives (A)
 - ii. One (1) – Provider Representative (B)
 - iii. One (1) – Representative of Advocate Organization (C)
6. Guest Speaker: Anna Cerna – IHSS Public Authority
7. Regular Agenda – Action Items
 - a. Election of Officers
 - i. Chair
 - ii. Vice Chair
 - b. 2024 IHSS Advisory Commission Attendance Report.....Page 50
 - c. Commission Goals
 - d. IHSS Program Stats
8. Regular Agenda – Information Items
 - a. Information Sharing

The County of Santa Cruz complies with the Americans with Disabilities Act. This meeting room is accessible for people with disabilities. If you wish to discuss reasonable modifications or accommodations, please call 454-4036 prior to the meeting. For the comfort of those with allergies and chemical sensitivities, please do not wear perfume or scented products to the meeting.

- i. Announcements
 - ii. Topics & Speakers
 - 1. Tentative Schedule
 - a. February 28, 2025 – Adult Protective Services
 - b. March 28, 2025 – Golden PACE Health
 - b. IHSS Advisory Commission Budget.....Page 52
 - c. IHSS Consumers
 - d. IHSS Providers
 - e. IHSS Program and Public Authority Updates
9. Report Outs
 - a. Legislative
 - b. CICA Conference Calls
 - c. Commission on Disabilities
 - i. September 14, 2024 Meeting Minutes.....Page 53
 - d. Seniors Commission
 - i. June 18, 2024 Meeting Minutes.....Page 55
 - ii. August 20, 2024 Meeting Minutes.....Page 57
10. Future Agenda Items
11. Adjournment

Next Regular Meeting: February 28, 2025, 1:00PM – 3:00PM @ 1400 Emeline AVE, Building K, Room 206, Santa Cruz.



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IHSS Advisory Commission

Meeting Minutes

Date: Friday, October 25, 2024
Time: 1:00PM to 3:00PM
Location: 1400 Emeline AVE, Building K, Room 206. Santa Cruz, CA
Present: Christine Kiebert-Boss (Chair, Consumer), Maria Arreola (Provider), Linda Campbell (Consumer), Becky Taylor (Vice-Chair, Commission on Disability), Stephanie Auld (Consumer)
Excused: Foster Andersen (Consumer), Lois Sones (Seniors Commission), Michael Molesky (Consumer), Jozett Irgang (Consumer)
Absent: None
Guests: Meggie Peña (presenter, Diversity Center), Julie Gabriel (Division Secretary, ALTC)
Staff: Juan Magaña (Staff)

Agenda

1. Call to Order
 - a. A meeting was called to order at 1:10 pm; a quorum was present.
2. Roll Call
3. Agenda Review
 - a. Agenda reviewed, item 8(d) was removed due to no IHSS Program and Public Authority updates provided to staff.
4. Consent Agenda
 - a. Approval of Meeting Minutes
 - i. September 27, 2024, Meeting
 - b. Commission Vacancies
 - i. One (1) – Consumer Representative
 - ii. One (1) – Provider Representative
 - c. Motion to approve consent agenda called by:
 - i. First/Second: Taylor/Campbell
 - ii. Ayes: Kiebert-Boss, Taylor, Campbell, Auld, Arreola
 - iii. Nays: None
 - iv. Abstain: None

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- v. Absent: Molesky, Anderson, Sones, Irgang
 - d. Motion carried unanimously.
 - 5. Guest Speaker: Diversity Center – Meggie Pina
 - a. Meggie Pina presented information on Embracing LGBTQ+ Lives: Navigating IHSS w/ Dignity and Respect. Topics covered included:
 - i. LGBTQ+ terminology.
 - ii. Pronouns and respectful communication.
 - iii. Care concerns facing LGBTQ+ people and older adults.
 - iv. Protecting recipients and providers from discrimination.
 - v. Advocacy resources for LGBTQ+ people and allies.
 - vi. Inclusive practices and policies.
 - b. See attached presentation for information that was presented.
 - 6. Regular Agenda – Action Items
 - a. Meeting Location - IHSS Advisory Commission
 - i. The chair mentioned that again we do not have a full commission to discuss this item.
 - ii. Commissioner Auld inquired about using Zoom for remote meeting.
 - 1. Staff informed that remote participation for commissioners is allowed under the Brown Act and under AB 2449. However, it requires technology that the commission does not have and would need to purchase.
 - 2. Commissioner Taylor also mentioned that under AB 2449, there would still need to be a quorum present in the physical meeting location. Staff concurred with this.
 - iii. Commissioner Taylor stated that at this point it is too much to be moving locations and recommended to keep the commission meeting at the current location.
 - iv. Motion to keep commission meetings at 1400 Emeline and remove this item from future agendas was called by:
 - 1. First/Second: Campbell/Auld
 - 2. Ayes: Kiebert-Boss, Taylor, Campbell, Auld, Arreola
 - 3. Nays: None
 - 4. Abstain: None
 - 5. Absent: Molesky, Anderson, Sones, Irgang
 - v. Motion carried unanimously.
 - b. Commission Goals
 - i. The commission discussed prioritization of commission goals.

1. Staff reminded that the 2024 biennial report was sent in advance for the commission to review. Copy of the report was also made available at the meeting.
 - ii. After lengthy discussion, the commission agreed to table this item until the November meeting.
 - iii. Motion to table Commission Goals until November meeting was called by:
 1. First/Second: Taylor/Campbell
 2. Ayes: Keibert-Boss, Taylor, Campbell, Arreola
 3. Nays: Auld
 4. Abstain: None
 5. Absent: Molesky, Anderson, Sones, Irgang
 - iv. Motion passed with 4 yes and 1 no vote.
 - c. IHSS Program Stats goals/stats
 - i. Commissioner Auld mentioned that some of the data that is needed would be the number of IHSS consumer with and without providers; the number of IHSS providers serving multiple clients; local vs state-wide program performance.
 1. Staff suggested that all this information can be obtained via a Public Records Request.
 - ii. Commissioner Auld also mentioned that we could not talk about stats without known what the commission goals are.
 - iii. Taylor suggested to also table this item to the November meeting.
 - iv. Motion to table IHSS Program Stats until the November meeting was called by:
 1. First/Second; Taylor/Campbell
 2. Ayes: Keibert-Boss, Taylor, Campbell, Arreola
 3. Nays: None
 4. Abstain: Auld
 5. Absent: Molesky, Anderson, Sones, Irgang
 - v. Motion passed with 4 yes votes and 1 abstention.
7. Regular Agenda – Information Items
 - a. Information Sharing
 - i. Announcements
 1. No announcements were made.
 - ii. Topics & Speakers
 1. Tentative Schedule
 - a. November 22 - Janie Whiteford, CICA

- b. January 24, 2025 – Registry Overview
- c. February 28, 2025 – Adult Protective Services
- d. March 28, 2025 – Golden PACE Health

b. IHSS Consumers

- i. No items reported by consumers.

c. IHSS Providers

- i. Arreola mentioned she received a question from a provider wanting to know if IHSS income counts towards Medi-Cal eligibility.
 - 1. Staff indicated that all income is factored in to the determination of Medi-Cal eligibility, but there are some exceptions. Staff suggested the inquire with their eligibility worker.

~~d. IHSS Program and Public Authority Updates~~

8. Report Outs

a. Legislative

- i. No report.

b. CICA Conference Calls

- i. Kiebert-Boss highly encouraged commissioners to participate in the CICA meetings as they are very informative.

c. Commission on Disabilities

- i. Taylor reported there was no meeting due to no quorum.

d. Seniors Commission

- i. No report.

9. Future Agenda Items

- a. Staff mentioned that the Advisory Commission budget will be included in the November meeting, per commissioner Molesky's request.

10. Adjournment

- a. Meeting adjourned at 2:55pm

Next Regular Meeting: November 22, 2024, 1:00PM – 3:00PM @ 1400 Emeline AVE, Building K, Room 206. Santa Cruz.



Embracing LGBTQ+ Lives: Navigating IHSS with Dignity and Respect

Meggie Pina

Senior Manager of Well-being Programs

IHSS Commission 10.25.2024

Meggie Pina Senior Manager of Well-being Programs
she/her





The Diversity Center inspires and advocates for the LGBTQ+ people of Santa Cruz and Monterey counties by providing critical services, spaces, education, and events that enhance our community's well-being allowing individuals to build resiliency and thrive.





Older Adult Programs

All programs are free to join. Donations are appreciated.

NOVEMBER 2024

05 ↗ | Making Pumpkin Luncheon
Centerpieces
TUES 10 am-12 pm @ The Diversity Center

05 ↗ | Rainbow Strollers
An Accessible Weekly Walking Group
TUES 1-3 pm | Text Rich at 831-322-9827

07 ↗ | Guided Mindfulness for Queers and
Friends (Weekly group)
THU 11 am -12 pm @ The Diversity Center

07 ↗ | Movie Matinee
THUR 3-5 pm @ The Diversity Center

07 ↗ | Write Queer (Nov. 7 and Nov. 21)
THUR 6:30-8 pm @ The Diversity Center



Older Adult Programs

All programs are free to join. Donations are appreciated.

NOVEMBER 2024

12 ↗ | Trauma-Informed Chair Yoga with
Irene
TUES 10:30-12 @ The Diversity Center

16 ↗ | Thanksgiving Luncheon
SAT 12:30-3 pm @ Trinity Presbyterian
Fellowship Hall, RSVP by emailing
60plus@diversitycenter.org



19 ↗ | Managing Winter Mental Health
Workshop
TUES 10-12 pm @ The Diversity Center

20 ↗ | Trans Day of Remembrance Vigil
WED 6-8 pm @ Resource Center for Non-Violence

26 ↗ | LGBTQ+ Anthems Music Bingo
MON 10 am - 12 pm @ The Diversity Center

Workshop Objectives

- Increase familiarity with LGBTQ+ terminology
- Clarify the Importance of pronouns and respectful communication
- Understand care concerns facing LGBTQ+ people and older adults
- Explore strategies for protecting recipients and providers from discrimination
- Increase awareness of advocacy resources for LGBTQ+ people and allies
- Foster a commitment to inclusive practices and policies



Why are we talking about LGBTQ+ cultural awareness?



- The lesbian, gay, bisexual, transgender, queer, questioning, intersex, asexual, two-spirit (LGBTQIA2S+) community consists of a people from all ages, races, ethnic, religious backgrounds, and a range of socioeconomic status.
- On June 6th 2023, The Human Rights Campaign Officially Declared 'State of Emergency' for LGBTQ+ Americans. 84 of the proposed 508 anti-LGBTQ+ bills were passed into law.
- As of October 2024 the ACLU is tracking 530 anti-LGBTQ+ bills in the United States. <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2024>
- These bills have attacked transgender people's right to health care, right to exist in public, and right to live openly, right to express themselves in Drag, on stage, and with a microphone. The goal is to erase trans lives and experiences.





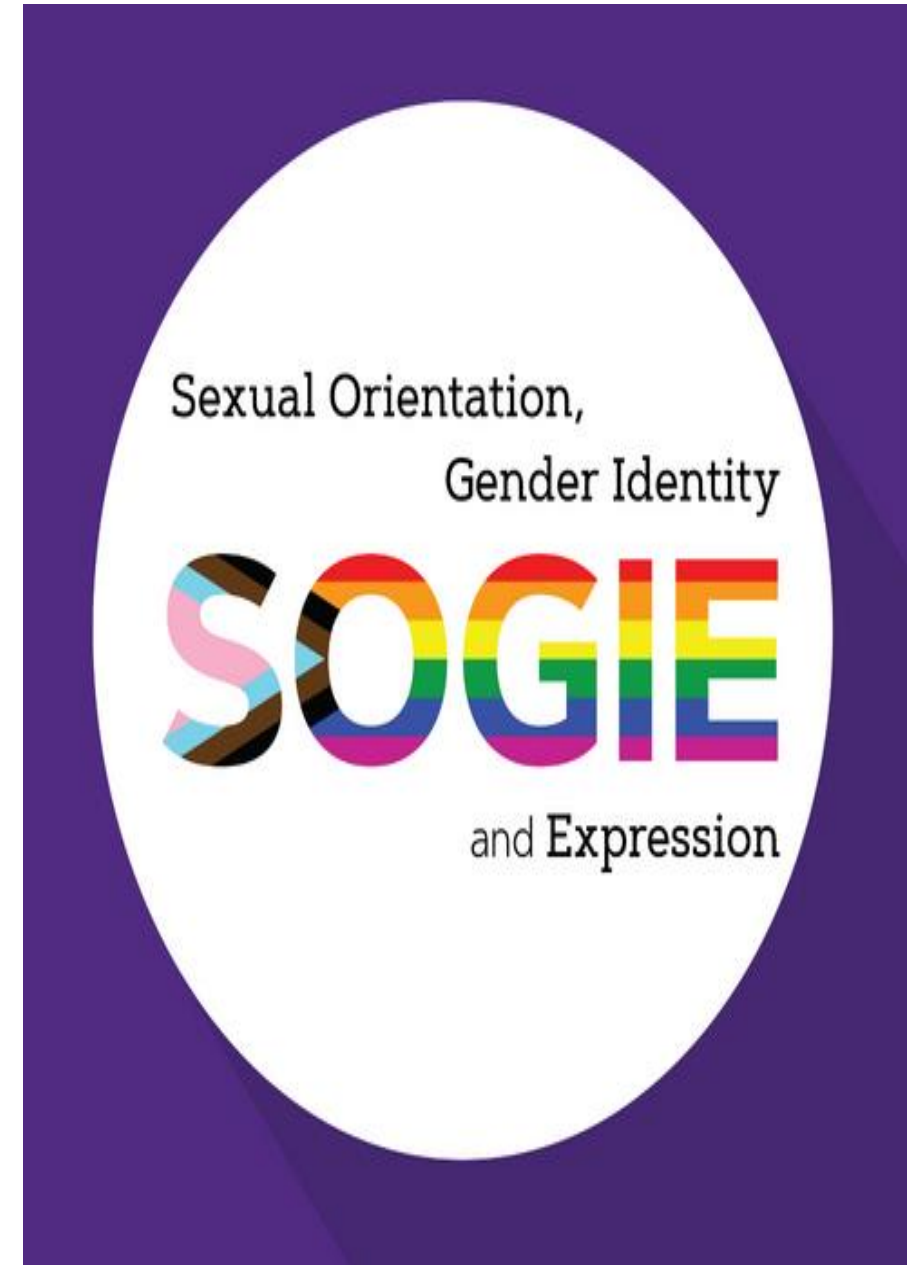
Distinct and Separate: Sex assigned at birth, gender identity, gender expression and sexual orientation are each distinct from one another.

Exists on Spectrums: SOGIE identities exist on spectrums, language to describe identities on these spectrums varies by the individuals that use that language.

Intersectional: SOGIE identities intersect with other identities like race, class, and ability to create unique life experiences.

Universal: Everyone has a SOGIE, and identity development is a natural, ongoing part of the human experience.

Self-Defined: How one understands, articulates and shares their SOGIE is self-determined.





diversity center
santa cruz county



LGBTQIA2S+

LGBTQIA2S+ is an acronym to describe people who are Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, Asexual, Two Spirit...

"+" sign is to recognize the limitless sexual orientations and gender identities used by members of our community.

[Definitions to Help Understand Gender and Sexual Orientation](#)

Sexual Orientation



Sexual Orientation: An inherent or immutable enduring emotional, romantic or sexual attraction to other people. Note: an individual's sexual orientation is independent of their gender identity

- **Gay:** A term that describes a person who is emotionally, romantically or sexually attracted to members of the same gender. Men, women and non-binary people may use this term to describe themselves.
- **Lesbian:** A woman who is emotionally, romantically or sexually attracted to other women. Women and non-binary people may use this term to describe themselves
- **Bisexual:** A person emotionally, romantically or sexually attracted to more than one gender, though not necessarily simultaneously, in the same way or to the same degree. Sometimes used interchangeably with pansexual.
- **Pansexual:** Describes someone who has the potential for emotional, romantic or sexual attraction to people of any gender though not necessarily simultaneously, in the same way or to the same degree. Sometimes used interchangeably with bisexual.
- **Demisexual:** Used to describe an individual who experiences sexual attraction only after forming an emotional connection.
- **Heterosexual:** Someone who is primarily emotionally, romantically, and/or physically attracted to people of a different gender. Heterosexual people are also sometimes referred to as "straight".
- **Heteronormative:** The outright or underlying assumption that all people are heterosexual.

<https://pflag.org/glossary/>



Being Asexual

Asexual: Often called “ace” for short, asexual refers to a complete or partial lack of sexual attraction or lack of interest in sexual activity with others. Asexuality exists on a spectrum, and asexual people may experience no, little or conditional sexual attraction.

ASEXUALITY ISN'T

- Abstinence because of a bad relationship
- Abstinence because of religious reasons
- Celibacy
- Sexual repression, aversion, or dysfunction
- Loss of libido due to age or circumstance
- Fear of intimacy
- Inability to find a partner

ACES MIGHT

- Want friendship, understanding, and empathy
- Fall in love
- Experience arousal and orgasm
- Choose to masturbate
- Choose to engage in sexual activity
- Choose not to engage in sexual activity
- Be of any gender, age, or background
- Have a spouse and/or children



Queer and QTPOC



- Queer: A term people often use to express a spectrum of identities and orientations that are counter to the mainstream. Queer is often used as a catch-all to include many people, including those who do not identify as exclusively straight and/or folks who have non-binary or gender-expansive identities. This term was previously used as a slur, but has been reclaimed by many parts of the LGBTQ+ movement.
- QTPOC: Queer and Trans People of Color.

Intersex



Up to 1.7 percent of babies are born with sex characteristics that don't fit typical definitions of male and female.

A row of five stylized baby icons. The first, second, fourth, and fifth icons are white. The third icon is orange. All icons are simple, rounded shapes representing a baby sitting down.

That makes being intersex as common as being a **redhead**

Like and share to spread the word
visit www.unfe.org/intersex-awareness
for more information

FREE & EQUAL
UNITED NATIONS FOR INTERSEX AWARENESS

Intersex is the current term used to refer to people who are biologically between the medically expected definitions of male and female. This can be through variations in hormones, chromosomes, internal or external genitalia, or any combination of any or all primary and/or secondary sex characteristics. While many intersex people are noticed as intersex at birth, many are not. As intersex is about biological sex, it is distinct from gender identity and sexual orientation. An intersex person can be of any gender identity and can also be of any sexual orientation and any romantic orientation.



Body - our body, our experience of our body, how society genders bodies, and how others interact with us based on our body

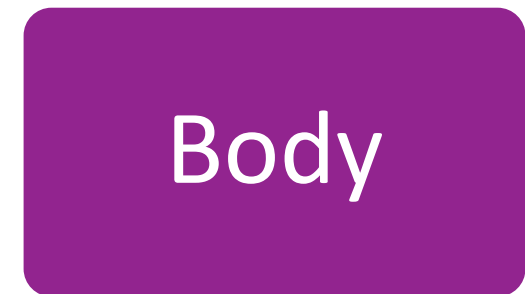
Identity - our deeply held, internal sense of self; who we internally know ourselves to be. A person's gender identity can correspond to or differ from the sex they were assigned at birth.

Expression – our social gender is the way we communicate our gender to others through such things as clothing, hairstyles, and mannerisms. It also includes how individuals, communities and society perceive, interact with, and try to shape our gender. Social gender includes gender roles and expectations and how society uses those to try to enforce conformity to current gender norms.

Gender



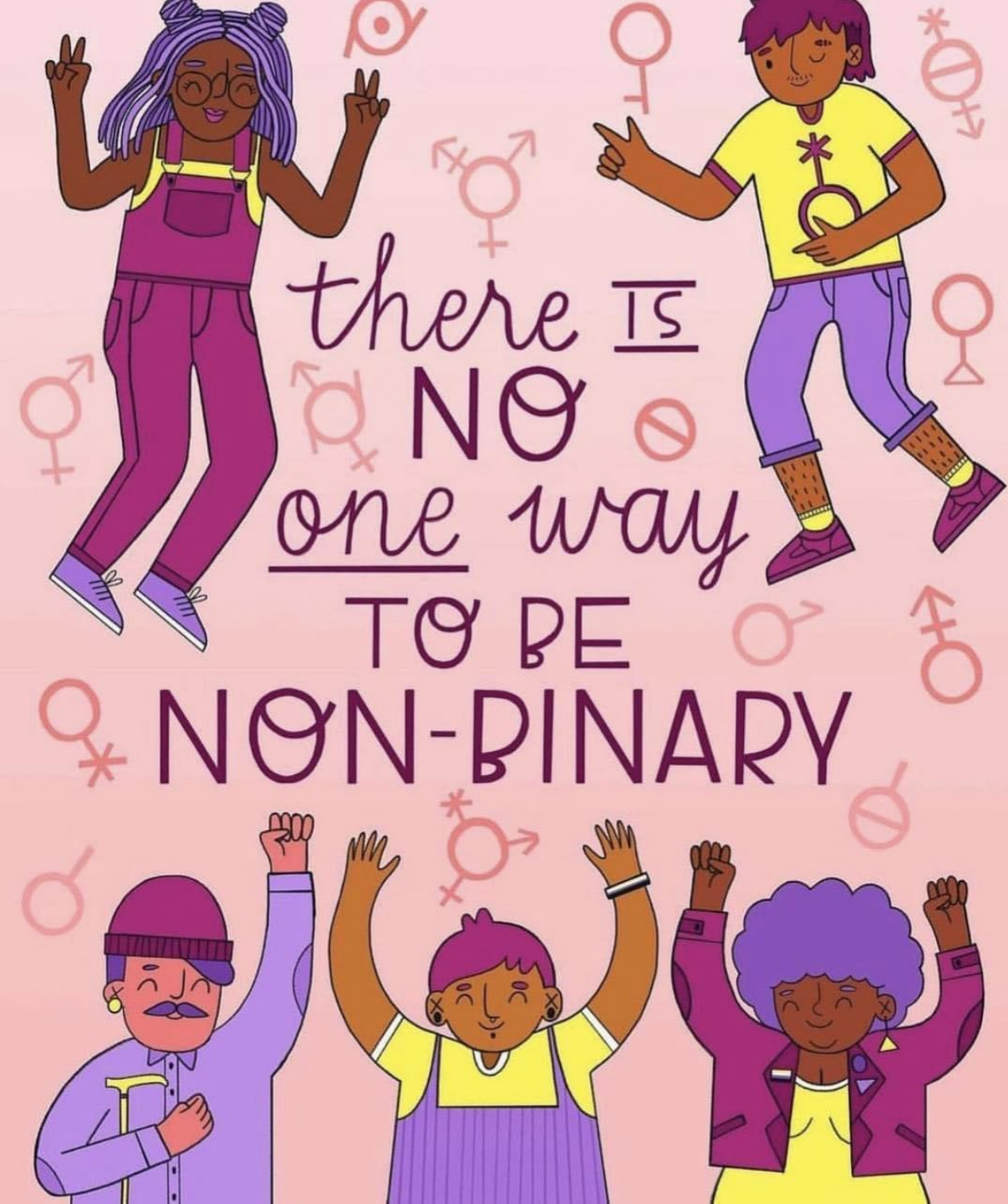
A person's comfort in their gender is related to the degree to which these three dimensions feel in harmony.



Transgender

- Transgender: An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth.
- Being transgender does not imply any specific sexual orientation. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.
- Trans people have existed throughout history and across cultures.
- Trans people often face discrimination hatred or fear just because of who they are.





5 Non-Binary People Explain What “Non-Binary” Means To Them

Gender Identity: How you feel. Girl, boy, both or neither. Everyone has a gender identity. **Gender Expansive:** Some people feel that the traditional ways of being a “boy” or “girl” do not fit for them. They live their lives showing that there are many ways to be a girl, boy, both or neither.

Gender Expression: People express themselves in many ways, such as through clothes or hairstyles. Sometimes people think that these things go with certain genders, but really you cannot guess someone’s gender or pronouns from how they look. In our school we respect that every person is unique and different, and we don’t tease or bully anyone about their personal expression.

Non-Binary: An adjective describing a person who does not identify exclusively as a man or a woman. Non-binary people may identify as being both a man and a woman, somewhere in between, or as falling completely outside these categories. While many also identify as transgender, not all non-binary people do. Non-binary can also be used as an umbrella term encompassing identities such as agender, bigender, genderqueer or gender-fluid

Two-spirit

- Two-spirit is a term used by some Indigenous North Americans to describe people who have a third-gender social role in their communities. It's an umbrella term that can encompass many different identities, including people who are male, female, transgender, non-binary, or queer.
- Two-spirit people are often seen as having both feminine and masculine traits, and are considered to occupy a distinct gender status. They are often highly regarded in their communities and are seen as a bridge between the two genders.
- The term "Two-spirit" is a Native concept, created by Native people who identified as Native LGBTQ. It's not a term that should be used by non-Native LGBTQ people.
- The term "Two-spirit" is relatively new, and is typically traced back to a gathering in Winnipeg in 1990. Before then, Two-spirit people had to carry out their traditions in secret.
- Not all tribes or Native Americans have accepted the term, and there is no one way to be Two-Spirit. Each tribe has its own unique spiritual beliefs and cultural practices.



<https://www.ihs.gov/lgbt/twospirit/#:~:text=Traditionally%2C%20Native%20American%20Two%2DSpirit,a%20distinct%2C%20alternative%20gender%20status.>

<https://www.baaits.org/>

Cisgender



Cisgender: A term that describes a person whose gender identity aligns with the sex assigned to them at birth. A term used to refer to an individual whose gender identity aligns with the sex assigned to them at birth. The prefix cis- comes from the Latin word for “on the same side as.” People who are both cisgender and heterosexual are sometimes referred to as cishet (pronounced “sis-het”) individuals. The term cisgender is not a slur.

Cisnormativity: The assumption that everyone is cisgender and that being cisgender is superior to all other genders. This includes the often implicitly held idea that being cisgender is the norm and that other genders are “different” or “abnormal.”

<https://www.itspronouncedmetrosexual.com/2011/11/list-of-cisgender-privileges/>

Cisgender Privilege Checklist (Pt. 1)

- ✓ I’ve never been told that I am “too young” to know my gender.
- ✓ There is reliably a place for me to use a bathroom that aligns with my gender.
- ✓ I can shop for clothing that aligns with my gender expression without fear.
- ✓ I have never been questioned or interrogated about my genitals.

@TRANSWELLNESSONTARIO

Cisgender Privilege Checklist (Pt. 2)

- ✓ I have never faced resistance when asking people to use my name.
- ✓ I can expect that my pronouns will be respected without protest.
- ✓ I have never had to fear being attacked for telling someone about who I am.
- ✓ People believe me when I tell them what gender I am.

@TRANSWELLNESSONTARIO

Everyone has pronouns



Everyone has pronouns, but this often goes unnoticed for people who identify with the gender they were assigned at birth.

Pronouns indicate something about someone's personal identity, and respecting personal identity is important in making people feel welcome, heard, and understood.

Respecting the pronouns of transgender and nonbinary older adults is an important step in making them feel included and safe in your agency.

Using the self-identified pronouns for someone is as important as using the right name. When providing services to someone new, it is best to ask their name along with their pronouns.

ASK



You cannot tell someone's name or pronoun just by looking at them.

RESPECT



If someone takes the time to let you know their name and pronoun, use and respect it. It's not up to you to decide someone else's identity.

Page 24

PRACTICE



If you have difficulty using someone's pronoun and name, practice. Ask co-workers, peers, and friends to point out when you've made a mistake.

Pronouns

Quick Grammar Lesson:

A **pronoun** is a word that is used instead of a noun.

Pronouns can also be an important part of affirming and respecting a person's gender identity.

It's important not to assume a person's pronouns. **He, she, or they** could all refer to the same individual.

For example:

He is going to the store to buy apples. Those apples are *his*.

She is going to the store to buy apples. Those apples are *hers*.

They are going to the store to buy apples. Those apples are *theirs*.



Pronouns



They/them/theirs are pronouns commonly used by folks who don't feel that pronouns like **he** or **she** best reflect their identity. Someone could also use a combination of pronouns:

he/they

she/he/they

she/they

Being referred to with the correct pronouns is really important to a person's sense of self and mental health.

You probably already use they/them pronouns...

For example, if you found someone's wallet on the ground, you probably wouldn't say,

"Someone lost *his* or *her* wallet!"

You would more likely say,

"I need to find the person who lost *their* wallet."

Pronouns

Let's talk about using pronouns properly:

Remember people's pronouns, and use them correctly. If you make a mistake, the best thing you can do is make a quick apology, correct yourself, and move on.



If you accidentally use the wrong pronouns, it doesn't have to be a big deal.

If you find that you have been regularly misgendering someone, it's important to address the mistake. You can apologize simply, like

"I'm sorry for misgendering you earlier."

But make sure not to over-apologize, explain yourself, or make excuses.

Pronouns



Remember people use pronouns differently.

When someone uses multiple pronouns, try to use all of those pronouns equally unless they have a preference.

Pronouns are about affirming someone's identity.

It's about seeing people for who they are and meeting them wherever they are at.

Remember, using the correct pronouns is important for affirming LGBTQ+ young people.

They're just words, but words with big impact.

While this is a complex topic, this is the main takeaway: **respecting pronouns should be easy.** It's a simple way to show you care about the people in your life. Using the correct pronouns is a simple way to say, **"I see you."** **"I care about you."** **"You deserve to be affirmed always."**



Common Pronoun Sets:

- She/Her/Hers/Ella
- He/Him/His/ Él
- They/Them/Theirs/Elle/Elly
- All Pronouns
- No Pronouns / Name Only

Misgendering:

To refer to someone using the incorrect pronouns and/or name which they do not use. ["deadname", dead pronoun"]

Ask me about my pronouns: My pronouns areWhat are your pronouns?

What name and pronouns do you go by?

Intersectionality

Intersectionality is a framework for understanding how the intersections of different aspects of identity create unique experiences of discrimination and marginalization.

The term intersectionality was coined by legal scholar and UCLA law professor [Kimberlé W. Crenshaw](#). The premise of intersectionality is that people live layered identities as members of multiple communities, which create unique and complex experiences of oppression and privilege.

As Crenshaw says in her talk at TEDWomen 2016, [The Urgency of Intersectionality](#), “Without frames that allow us to see how social problems impact all the members of a targeted group, many will fall through the cracks of our movements, left to suffer in virtual isolation.”



By 2030

- LGBTQ+ people are living vibrant, full lives across the U.S. and around the world. While the U.S. census has never measured how many LGBTQ+ people live in America, reports estimate that there are currently around 3 million LGBTQ+ adults over age 50. That number is expected to grow to around 7 million by 2030.
- As our numbers grow, we want to ensure that LGBTQ+ people to feel valued, safe and supported.



Discrimination

- Due to a lifetime of discrimination, harassment, and violence, LGBTQ+ older adults are more likely to become ill at an earlier age than their straight peers.
- About 20 percent of LGBTQ+ people avoid medical care out of fear of discrimination
- In some instances, an LGBTQ+ older adult might only seek assistance for emergency care, which can be costly not only to their health but also their financial security.
- LGBTQ+ older adults are less likely than heterosexual older adults to access aging network services and providers, senior centers, meal programs, and other entitlement programs because they fear discrimination or harassment if their sexual orientations or gender identities become known.
- Some LGBTQ+ older adults may access aging service agencies but may choose to remain closeted or private about their sexual orientation or gender identity, and may refer to partners, significant others, or loved ones as a “friend,” “roommate,” or “sibling.”



The risks and facts

- Aging service providers should be aware that LGBTQ+ older adults at greater risk for physical and mental illnesses, and other issues including:
 - social isolation
 - depression and anxiety
 - poverty
 - chronic illnesses
 - delayed care-seeking
 - poor nutrition
 - premature mortality
 - LGBTQ+ older adults are **2x more likely to live alone** and **4x less likely to have children** than their heterosexual, cisgender peers. This makes it more difficult to age successfully in their homes and communities
 - A national survey in 2015 reported that 65% of older transgender respondents felt that they would have **limited access to care** as they age, and 55% feared that they would be **denied medical treatment**
 - 70% of LGBTQ+ older people fear having to “**re-closet**” themselves when seeking elder housing
 - 53% of LGBTQ+ elders report feeling **isolated** from others
 - 41% of LGBTQ+ older people **report having a disability**, compared to 35% of heterosexual older people
 - 50% of all Americans living with HIV are **over 50 years old**
- <https://www.sageusa.org/get-involved/take-action/old-and-bold/>



LGBTQ Dignity: Caregiving, Health and Housing Experiences of Adults 45+



54%
are parents
or grandparents

82%

are concerned about having
adequate family and/or social
supports to rely on as they age



Most LGBTQ adults are in good health, but take medication

54%

have a disability that keeps
them from participating fully in
work, school, household, or
other activities

75%

in good health

87%

take at least one
prescription medication
on a regular basis

Social isolation is a risk for a majority of LGBTQ



52%

feel left out, feel they lack
companionship, and feel
isolated as caregivers

The three most common concerns for LGBTQ caregivers are:

64%
feeling
emotionally
stressed

60%
finding it
difficult to
exercise

57%
finding it
difficult to get
enough rest

Many LGBTQ adults age 45 and older are providing care or are likely to provide care to a loved one in the future

63%

have provided
caregiving to an
adult loved one
such as a relative,
friend, spouse
or partner

61%

think it is likely
they will be a
caregiver to a
loved one in
the future



23%

have received
caregiving as an
adult from a loved
one such as a
relative, friend,
spouse or partner

66%

think it is likely
they will need
caregiving from
a loved one in
the future

Fears in the home buying process because of

72%
Sexual
orientation

55%
Age

32%
Gender
or gender
identity

41%

of LGBTQ people are
concerned about hiding their
identity to access suitable
housing as they age



LGBTQ adults fear discrimination in the rental or home buying process

■ Rental ■ Home buying



36% **48%**
African American/Black



37% **31%**
Hispanic/Latino



20% **34%**
Asian American Pacific Islander



25% **20%**
White

Things LGBTQ adults say companies can do to reach their communities:

71%

Listen and attempt to truly
understand LGBTQ communities

88%

Support the
Equality Act

72%

Conduct diversity and sensitivity
trainings at workplaces

The National Resource Center on LGBTQ+ Aging



- The National Resource Center on LGBTQ+ Aging is the country's first and only technical assistance resource center focused on improving the quality of services and supports offered to lesbian, gay, bisexual and/or transgender older adults, their families and caregivers.
- The [National Resource Center on LGBTQ+ Aging](#) is an information powerhouse. There are publications, fact sheets, and guides relevant to LGBTQ+ aging, including:
 - Caregiving
 - LGBTQ+ inclusion and cultural competency
 - Elder abuse and neglect
 - Social security, Medicare, and Medicaid
 - Health care
 - Financial security and retirement
 - Housing
 - HIV/AIDS

sage | Advocacy &
Services for
LGBTQ+ Elders

**National Resource Center
on LGBTQ+ Aging**

Old and Bold: Services for All

Old and Bold: Services for All is a campaign launched by SAGE to ensure that LGBTQ+ and HIV positive older people nationwide are able to access welcoming aging services and supports regardless of where they live. Their mission is to build a world where LGBTQ+ people can age with dignity and respect. A world where they can access services like meal assistance, senior center programs, health and wellness promotions, caregiver support, benefits enrollment, transportation, or any other aging service.

<https://www.sageusa.org/get-involved/take-action/old-and-bold/>



AB 959: Lesbian, Gay, Bisexual, and Transgender Disparities Reduction Act



- AB 959 requires four specific state departments: The California Department of Social Services, Department of Health Care Services (DHCS), Department of Public Health, and Department of Aging, to begin collecting voluntary, self-identification information pertaining to sexual orientation and gender identity when collecting, directly or by contact, other required demographic data.
- **Purpose:** AB 959 requires state agencies that provide health and human services to collect voluntary information on sexual orientation and gender identity (SOGI). The goal was to reduce health and welfare disparities for the LGBT community by ensuring that California public policy meets their needs.
- **Author:** Assemblymember David Chiu of the 17th Assembly District
- **Sponsor:** Equality California
- **Passage:** AB 959 passed on May 27, 2015, and was passed on third reading on June 1, 2015.
- The California Department of Social Services (CDSS) has issued instructions regarding the implementation of [AB 959](#), also known as the Lesbian, Gay, Bisexual, and Transgender Disparities Reduction Act in the In-Home Supportive Services Program.
- <https://www.cdss.ca.gov/Portals/9/ACL/2018/18-133.pdf?ver=2018-11-13-125450-473>
- Implementation of AB 959 began July 1, 2018.



Preparing to Engage with In-home Aging Services: Tips for LGBTQ+ People

LGBTQ+ older adults should expect a high-quality healthcare experience (Boyd, 2018). Inviting a service provider into one's home or the home of a loved one can be vulnerable or intimidating (SAGE & National Resource Center on LGBTQ Aging, n.d.). To reduce anxiety about a service provider entering one's home, LGBTQ+ older adults and their loved ones can use the [National Resource Center on LGBTQ+ Aging's](#) publications "10 Tips for Finding LGBT-Affirming Services" and "Advocating for Yourself and Others: Health and Aging Services." These resources can help you find local, inclusive, and culturally responsive care providers.

Accessing services may look different in rural and urban environments, across state lines and regions, and among individuals with intersecting identities (Nelson et al., 2022). If you cannot guarantee that a provider will be welcoming of you or a loved one's sexual orientation, gender identity, or HIV status, the following tips can be utilized to prepare for a service provider entering your home.

Before a Provider Visits:

- 1) **Research Your Provider or Agency:** Check online or have an advocate call to see if the agency trains staff on how to work with LGBTQ+ individuals or if they have an LGBTQ+ nondiscrimination policy.
- 2) **Choose a Trusted Contact:** Identify a loved one or community member who can act as an advocate and be present with you physically or virtually. Communicate with your advocate about your desires if you want to keep certain aspects of your life private. You can use SAGE's LGBTQ+ Advance Care Planning Toolkit.
- 3) **Gather Your Personal Health Information:** Create a "health journal" to keep a list of questions to ask and to document your current medication list or relevant notes from recent medical visits.
- 4) **Define Your Boundaries:** Make a list of what information you are comfortable sharing with a service provider.
- 5) **Know Your Rights:** Review local privacy regulations and laws to remain in control of what information needs to be shared if your area does not have clear LGBTQ+ protections.
- 6) **Review Your Emergency Information:** If you have emergency medical information posted in your home, ensure it only includes essential details that you are comfortable sharing.

This project was supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$373,636.85 with 72% percentage funded by ACL/HHS and \$104,878.85 amount and 28% percentage funded by non-governmental source(s). The contents are those of the author(s) and do not necessarily represent the official views of, nor are an endorsement, by ACL/HHS, or the U.S. Government. All Right Reserved.

7) **Limit Personal Displays:** If you do not want to reveal aspects of your identity, temporarily remove certain personal items and decorations by placing them in a tote bag or plastic storage bin between home visits. If you have a social media account, do you have it set to private?

During a Provider Visit:

- 1) **Read Your Intake Documents Carefully:** Make sure you or an advocate understand what information is being asked of you at intake and if there are instructions on what to do if you receive "substandard care" or wish to file a grievance.
- 2) **Trust Your Instincts:** Listen to your gut and make decisions out of caution to protect you or a loved one from discrimination and harm.
- 3) **Use Your Advocate:** Invite your advocate to be present. An advocate can help ensure that only necessary information is shared while your care needs are addressed.
- 4) **Document the Experience:** Take notes or ask your advocate to take notes for you.
- 5) **Remember Your Boundaries:** Only share information that is directly relevant to the visit or necessary to address your care needs. Avoid providing unnecessary details.
- 6) **Communicate Your Preferences:** Express your hope and expectation of confidentiality about any personal information shared.
- 7) **Create a Care Plan:** Ask your provider for an overview or an agenda of your time together to outline your specific preferences, guide the care you receive, and help to avoid off-topic discussions about personal aspects of your life.

After a Provider Visit:

- 1) **Document Your Experience:** Summarize important notes for future experiences.
- 2) **Ask for Notes:** Ask your provider for a copy of their notes so you have a record of their perspective of the interaction.
- 3) **Process with Your Advocate:** Discuss your experience with your advocate if they were present. Compare your perspective with your advocate's perspective.
- 4) **Talk with Your Friends:** Reach out to friends in your network who have had similar experiences.
- 5) **Reflect on Your Experience:** If you have a choice in providers, consider whether you are comfortable receiving services from this provider again or if you want to choose a new provider.

6) Report Discrimination and Mistreatment: Many aging providers will have a grievance procedure for reporting discrimination and mistreatment. Additional resources for support in filing a discrimination and mistreatment complaint may include your state LGBTQ+ Equality organization, LGBTQ+ community organization, state/local office of civil/human rights and state/local adult protective services.

The National Resource Center on LGBTQ+ Aging provides technical assistance and resources. Should you need assistance in locating an office to file a complaint of discrimination or mistreatment, complete and submit the following [Information & Referral Form](#).

The SAGE National Resource Center on LGBTQ+ Aging is grateful to Madeleine Thompson, SAGE Intern, MSW '24 candidate for their support in developing and authoring this fact sheet.

<https://lgbtagingcenter.org/wp-content/uploads/2024/06/Preparing-for-In-Home-Aging-Supports.pdf>

As an LGBT older adult or a caregiver, you and your loved one might be considering home care or long-term care services. However, you might be concerned about finding services and programs that are LGBT affirming. Inviting someone into your home or revealing personal information can be intimidating at any time, and you may be feeling particularly vulnerable at this point in time. It is important to find service providers who understand LGBT issues and can be trusted to provide you with competent, respectful care. Here are ten helpful tips on finding an LGBT-affirming service provider:

1. The best references come from the people you already know and trust. Ask friends with similar circumstances who they have worked with, and whether they felt respected and comfortable.
2. Contact your local SAGE Affiliate or LGBT aging provider, LGBT Community Center, PFLAG chapter or other LGBT organizations and ask for referrals to providers they have worked with in their networks.
3. Look to see if there are service providers that advertise in your local LGBT newspapers and magazines (either print or online) or have signed up as sponsors, members, etc. with local LGBT groups.
4. Reach out to your local HIV/AIDS service providers, who often have close connections to LGBT-affirming home care agencies and other services.

5. Ask or look for information about whether an agency's staff have been trained on how to provide culturally competent care to LGBT people.
6. Check the SAGECare website (listed below) for agencies that have received the SAGECare Credential for completing training by SAGE.
7. Ask providers directly if they serve LGBT individuals, and if so, find out whether that answer is concrete (current or past clients) or hypothetical ("we welcome everyone").
8. Most providers have non-discrimination policies—check to see if these policies specifically include sexual orientation and gender identity, and whether they post or distribute their policies openly. You can also ask how those policies are enforced.
9. Review the provider's pamphlets, brochures or websites. Are LGBT individuals represented in these materials? Do they use LGBT-inclusive language—such as partner, domestic partner, and significant other—on their websites, in their print materials or on their intake forms?
10. Most importantly, always trust your instincts! Only you and your loved one know what's right for you.

Additional Resources:

SAGE and SAGENet for a listing of SAGE Centers and Affiliates: www.sageusa.org

SAGECare for a listing of organizations trained and credentialed by SAGE: www.sageusa.care

SAGE Hotline for Peer Support and Resources: **1-888-234-SAGE** or SAGE@GLBThotline.org

CenterLink for a listing of LGBT Community Centers across the country:
www.lgbtcenters.org

PFLAG for local support groups and resources: www.pflag.org

*Revised in 2017 by the National Resource Center on LGBT Aging and the SAGECAP Program,
with support from the Harry and Jeanette Weinberg Foundation.*

Long-Term Care Equality Index (LEI)



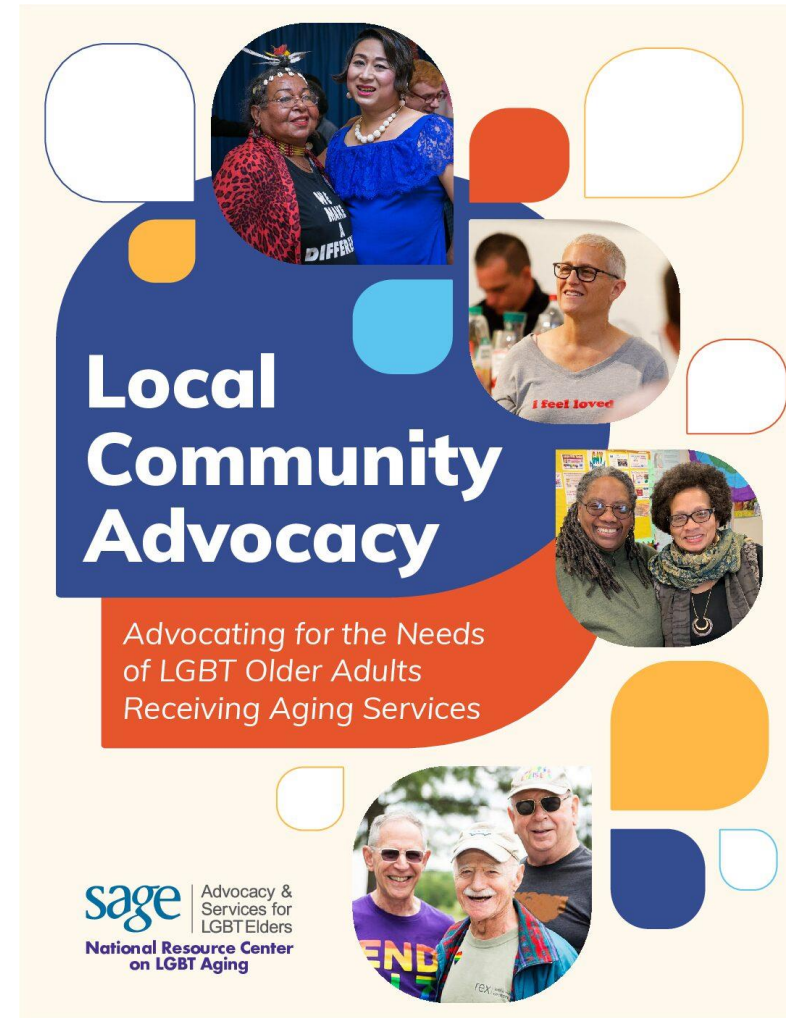
- The Long-Term Care Equality Index 2023 represents the first validated survey on LGBTQ+ inclusion in long-term care and senior housing communities. SAGE and The Human Rights Campaign Foundation are excited to present this report on the **200** communities from **34 states** (including D.C.) that actively participated in the LEI 2023 survey.
- [Read the full Long-Term Care Equality Index 2023 here>>](#)
- [Download the Long-Term Care Equality Index 2023 Executive Summary here>>](#)
- Interested in learning more? Download this quick fact sheet on [Why the LEI?](#)
- The LEI is an assessment tool that will encourage and help residential long-term care communities to adopt policies and best practices that provide culturally competent and responsive care to LGBTQ+ older people. LEI will provide resources and technical assistance to bring these policies and practices to life.



Local Community Advocacy: Advocating for the Needs of LGBT Older Adults Receiving Aging Services



- Efforts are underway at national and local levels to help communities become more welcoming of LGBT older adults. These efforts include creating non-discrimination policies that include LGBT populations, providing LGBT cultural competency training, and developing LGBT welcoming aging programs and services
- <https://lgbtagingcenter.org/library/item/local-community-advocacy-advocating-for-the-needs-of-lgbt-older-adults-receiving-aging-services/>



Recommendations for Improving IHSS and Health Services for LGBTQ+ Individuals



- **Training and Cultural Competency:** Recommend cultural competency training for IHSS providers and recipients to reduce bias and harassment. Review training that is being offered to ensure that it includes information about IHSS non-discrimination policies and LGBTQ+ cultural awareness.
- **Inclusive Policies:** Advocate for clearly communicating anti-discrimination policies within IHSS.
- **Encouraging LGBTQ+ Participation in Health Services Feedback:** Intentionally invite LGBTQ+ community members to attend commission meetings and provide direct feedback on care services. Create a survey for IHSS recipients and providers to complete to better understand how to support their wellness.



Accountability for Discriminatory Behavior

- **Recommendation:** Clearly communicate nondiscrimination policy on Santa Cruz County IHSS website.
<https://santacruzhumanservices.org/AdultLongTermCare/In-HomeSupportiveServices-CountyofSantaCruz/WhatisIHSS>
- **Recommendation:** Clearly communicate IHSS Recipients Rights and Responsibilities. Creates a Provider rights and responsibilities
- **Recommendation:** Communicate and Implement clear protocols for reporting IHSS providers and recipients who engage in discriminatory behavior.
- **Rationale:** This ensures that providers and recipients understand the seriousness and impact of their actions and that there are repercussions for discriminatory practices.



LGBTQ+ Affirming Care Certification

- **Recommendation:** Establish a certification program for IHSS providers who undergo specialized training in LGBTQ+ affirming care, ensuring that recipients can have access caregivers who are trained in providing inclusive and respectful care.
- **Rationale:** LGBTQ+ individuals can feel more comfortable choosing providers who have demonstrated knowledge and empathy in their unique needs.
- **In practice:** Free LGBT+ Awareness Trainings for Caregivers! In 2019 The County of Sonoma Health and Human Services Agency offered 4 training opportunities. Caregivers of older adults were invited to improve their skills in working with LGBTQ+ adults by attending a free training. Attendees earned a Certificate of Completion and \$25, if they register at least one week ahead of the class date, arrive on time and complete the four-hour class. The training helped family care providers or paid workers with In-Home Supportive Services, private homecare agencies, and assisted living or skilled nursing facilities understand the challenges faced by LGBT+ seniors and how to improve their care and services.

<https://sonomacounty.ca.gov/lgbt-trainings-for-caregivers-july-oct-2019>





Leaders Who Authentically Embrace Diversity, Equity & Inclusion Believe These 8 Things

1. Diversity, equity and inclusion are everyone's responsibility.
2. No marginalized population is more important than another.
3. One person's life experience doesn't discredit another's.
4. Words *do* matter.
5. Actions mean more than words.
6. Embracing allies is essential.
7. Change starts by meeting people where they are.
8. There is no finish line.

[Resource](#)



Get connected!

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[Follow us on Facebook](#)

[Sign up for our newsletter](#)

Meggie Pina (she/her)
Senior Manager of Well-being Programs
831.322.4871

Meggie.pina@diversitycenter.org



Resources

- https://lgbtagingcenter.org/wp-content/uploads/2024/06/Pronoun-Fact-Sheet_Final.docx.pdf
- https://www.disabilityrightsca.org/system/files/file-attachments/547001_0.pdf
- <https://www.cdss.ca.gov/inforesources/ihss/fact-sheets>
- <https://lgbtagingcenter.org/library/topic/health/>
- <https://pflag.org/glossary/>
- https://hrc-prod-requests.s3-us-west-2.amazonaws.com/welcoming-schools/documents/WS_LGBTQ_Definitions_for_Students.pdf?mtime=20200713131845&focal=none
- <https://www.aarp.org/pri/topics/aging-experience/demographics/maintaining-dignity-lgbt/>
- <https://www.thetrevorproject.org/resources/article/understanding-gender-identities-and-pronouns/>
- <https://press.aarp.org/2022-6-14-New-AARP-Survey-Shows-Older-LGBTQ-Adults-Are-Worried-About-Discrimination-and-Lack-of-Support-as-They-Age>



Resources

- https://legacy.lambdalegal.org/sites/default/files/publications/downloads/whcic-report_when-health-care-isnt-caring.pdf
- <https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-the-facts-on-lgbt-aging.pdf>
- <https://www.lgbtmap.org/file/LGBT-People-With-Disabilities.pdf>
- <https://lgbtagingcenter.org/wp-content/uploads/2024/06/Preparing-for-In-Home-Aging-Supports.pdf>
- <https://www.aarp.org/pri/topics/aging-experience/demographics/maintaining-dignity-lgbt/>
- <https://lgbtagingcenter.org/wp-content/uploads/2024/06/How-to-Advocate-for-Yourself-and-Others-in-Healthcare-Settings-Final.docx.pdf>
- <https://thelei.org/about-the-lei>
- <https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-welcoming-agency-guide-inclusive-services-for-lgbt-older-adults.pdf>
- https://www.the519.org/wp-content/uploads/2022/02/CreatingAuthenticSpaces_Pronouns.pdf

COUNTY OF SANTA CRUZ

Inter-Office Correspondence

DATE: October 15, 2024
TO: Various County Advisory Bodies
FROM: Chair Justin Cummings
RE: SUBMISSION OF 2024 ATTENDANCE REPORTS



The purpose of this memo is to remind you that the advisory bodies listed below are required to submit attendance reports (only) to the Board of Supervisors at the conclusion of this year, documenting attendance at meetings held during 2024. The report is to be submitted to our office on or before January 31, 2025.

- Historic Resources Commission
- Housing Advisory Commission
- In-Home Supportive Services Advisory Commission
- Integrated Waste Management Local Task Force
- Latino Affairs Commission
- Mental Health Advisory Board
- Mobile and Manufactured Home Commission
- On-Site Sewage Disposal Technical Advisory Group
- Parks and Recreation Commission
- Planning Commission
- Santa Cruz-Monterey-Merced-San Benito-Mariposa Managed Medical Care Commission (2024 only)
- Seniors Commission
- Treasury Oversight Commission
- Water Advisory Commission
- Women's Commission
- Workforce Development Board

Your next full report highlighting activities during 2024 and 2025 will not be due until January 31, 2026.

Please send your 2024 attendance report directly to the office of the Board of Supervisors no later than January 31, 2025. If you have any questions, please feel free to contact Jesseka Rodriguez at extension 2200.

**IHSS Advisory Commission
2024 Attendance Roster**

Name	Affiliation	Jan	Feb	Mar	Apr	May	Jun	Aug	Sep	Oct	Nov
Foster Andersen	Consumer (A)	E	X	X	X	C	X	E	E	E	C
Michael Molesky	Consumer (A)	E	X	X	X	C	E	E	X	E	C
Linda Campbell	Consumer (A)	X	X	X	X	C	X	X	X	X	C
Jozett Irgang	Consumer (A)	E	X	X	E	C	X	X	E	E	C
Christine Kiebert-Boss	Consumer (A)	X	X	X	X	C	X	X			
Stephanie Auld	Consumer (A)								X	X	C
Vacant	Consumer (A)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Maria Arreola	Provider (B)	X	X	X	X	C	A	X	X	X	C
Patricia Fohrman	Provider (B)	X	X	X	X	C	X	R	R	R	R
Vacant	Provider (B)							n/a	n/a	n/a	n/a
Lois Sones	Seniors Commission (C)	X	X	X	X	C	E	X	X	E	C
Becky Taylor	Commission on Disabilities (C)	X	X	X	X	C	X	X	X	X	C
Stephanie Auld	Family Member of Consumer (C)	n/a	n/a	n/a	n/a	C	X	X			
Christine Kiebert-Boss	Family Member of Consumer (C)								X	X	R
Vacant	Family Member of Consumer (C)										n/a

Key:

- X = Present
- E = Excused
- A = Absent
- R = Resigned
- n/a = Not yet appointed
- C = meeting cancelled

IHSS Advisory Commission Annual Budget FY 24-25	Budget	\$5,995.93
	Used	\$1,200.00
	Balance	\$4,795.93

<u>Invoice Date</u>	<u>Expense</u>	<u>Amount</u>	<u>Payment Date</u>
9/30/2024	Q1 - Stipends	\$ 900.00	10/1/2024
11/26/2024	Q2 - Stipends	\$ 300.00	12/5/2024
		<u>\$ 1,200.00</u>	



Santa Cruz County Commission on Disabilities

701 Ocean Street, Room 510, Santa Cruz, CA 95060
P: (831) 454-2772 F: (831) 454-2411 TTY/TDD 711

commissions@santacruzcountyca.gov

www.scccod.net

Meeting Minutes

DATE: Thursday, September 12, 2024
TIME: 12:30 PM to 2:00 PM
LOCATION: Santa Cruz County Building, Fifth Floor – Redwood Conference Room
701 Ocean Street, Santa Cruz, CA 95060
PRESENT: John Daugherty (*Co-Chair - 1st District*), Camille Summers (*1st District*), Fay Levinson (*2nd District*), Becky Taylor (*Co-Chair - 3rd District*), Brenda Gutierrez Baeza (*4th District*), David Molina (*5th District*)
EXCUSED: Richard Gubash (*3rd District*)
ABSENT: None
STAFF: Kaite McGrew (*Commissions Manager*)
GUESTS: No members of the public were present.

1. Call to Order

Meeting convened at 12:38 PM.

2. Roll Call

3. Agenda Review

4. Approve August 8, 2024 Minutes

Motion to approve minutes as written

Motion/Second: Molina/Gutierrez Baeza

Motion passed unanimously.

5. Public Comment: None

6. New/Continuing Business:

6.1. Strategic Action Planning

Commission reviewed the current Strategic Action Plan and discussed opportunities for collaborative efforts with other advisory bodies. A joint meeting with the E&D/TAC, Metro advisory committee (MAC) the RTC, Seniors Commission and the IHSS Commission to discuss affordable, accessible, transportation. Other topics such as affordable accessible housing and food accessibility for people with disabilities were also discussed. Various formats (retreat/brainstorming session, town hall, forum/panel format, guest speaker event, etc.)

Motion to establish an ad hoc Collaborative Activities Subcommittee authorized to develop and implement an activity for the Commission to collaborate with community partners to address an issue of importance.

Motion/Second: Molina/Summers

Motion passed unanimously.

Taylor appointed Daugherty, Gutierrez Baeza, Levinson, and Molina and Taylor to the subcommittee.

7. Commission Reports

7.1. Cabrillo College Accessibility Center Advisory Committee Report:

Gutierrez Baeza plans to attend the next meeting in November or, if unavailable, Commission will send an alternate.

8. Commission Priority Reports:

8.1. Accessibility Awareness Priority Report: No Report

8.2. Accessible Adaptive Recreation Priority Report: No Report

8.3. Commission History Subcommittee Report: No Report

8.4. Community Partner Collaboration Report: No Report

8.5. Legislative Priority Report: No Report

8.6. Affordable Accessible Housing Report:

Staff reported sending information to Suzanne Ise (*Principal Planner*) from Beyond Access Consulting regarding an upcoming five-day virtual training course to review information covered on the examination to become a Certified Access Specialist (CASP) in the State of California.

8.7. Affordable Accessible Transportation Report: :

Staff reported that the METRO's Accessibility Coordinator who was tentatively scheduled to present to the Commission is no longer with the METRO. Once the position has been filled, they will reschedule the speaker's visit.

9. Staff Report

Staff provided a copy of the Commission's memo itemizing their EEO/CR Plan feedback and announced that Molina will be making a presentation to the Equal Employment Opportunity Commission on Disability Employment Awareness Month.

10. Announcements/Emerging Matters:

Daugherty reported that, during a first reading, all seven Santa Cruz City Councilmembers recently voted to remove the exception in the State's rent control statute that would have allowed the St. George to raise rents beyond the allowable limit. Should it be approved during the required second reading, it would take effect before the rent increase at the St. George was scheduled to take place. Daugherty will provide an update at the next meeting.

11. Adjournment

Meeting adjourned at 2:04 PM.

Respectfully submitted by:

Kaite McGrew, *Commissions Manager*



Santa Cruz County Seniors Commission

701 Ocean Street, Room 510, Santa Cruz, CA 95060
P: (831) 454-2772 F: (831) 454-2411 TTY/TDD 711
commissions@santacruzcounty.us
www.sccseniors.org

Meeting Minutes

DATE: Tuesday, June 18, 2024

TIME: 12:30 PM

LOCATION: Elderday Adult Day Health Care, 501 Main St., Watsonville, CA 95076

PRESENT: Dena Taylor (1st District), Suzanne Doty (Chair - 1st District), , Lois Sones (3rd District), Alicia Rodriguez (3rd District), Katie Limas (Vice Chair -4th District), Carol Childers (5th District)

EXCUSED: Mark Johannessen (2nd District), Patricia Fohrman (4th District)

ABSENT: Antonio Rivas (2nd District)

STAFF: Kaite McGrew (Commissions Manager)

GUESTS: No members of the public were present.

1. Call to Order/Roll Call/Agenda Review

Meeting convened at 12:38 PM.

2. **Motion to Approve April 16, 2024 Meeting Minutes**

Minutes revised to add clarifying language and eliminate a typo.

Motion to approve minutes as amended.

Motion/Second: Taylor/Childers

Motion passed unanimously.

3. Public Comment: None

4. New Business/Action Items:

4.1. Consider Advocacy Opportunities for Meals on Wheels (MOW) CORE Funding

Commission discussed recent changes to the way CORE funding carve-outs are being handled – Sones reported that MOW was defunded from the main budget and retroactively included in a carve-out, however the new carveouts do not include any safety net programs, including MOW. This development will result in extreme hardship to an already overburdened program. Meals on Wheels is unique in that they not only deliver food to homebound seniors, but also perform wellness assessments while there to ensure that residents needing additional care management are timely referred to appropriate services before their situations become life threatening. Santa Cruz County is one of the few Counties that have not needed a wait list yet.

Motion authorizing the Chair to send a letter advocating with the Board to include Meals on Wheels in funding carved out for safety net programs and that these carveouts remain consistent.

Motion/Second: Sones/Taylor

Motion passed unanimously.

4.2. Solutions Summit Follow-Up

Commission discussed the upcoming Solutions Summit. Sones reported that the County is planning to take over management of the Solutions Summit process from the Area Agency on Aging, effectively shifting it from a community event that included the County as one of many participants to a County event managed by County staff. There are concerns that this change

will negatively impact the effectiveness of the event to achieve its stated goals because The County does not serve seniors exclusively or even primarily.

4.3. Master Plan for Aging Update

Commission discussed the overlap between the Solutions Summit and the Master Plan for Aging efforts.

5. District Reports

5.1. District 1

Doty attended a successful event at the Market Street Senior Center and reported that they plan to host another in September. Taylor summarized her many recent contributions to the Retired Public Employees Newsletter.

5.2. District 2: No Report

5.3. District 3:

Rodriguez shared details about MOW waiting lists in San Benito and two webinars she attended: one related to housing and the other related to the state of the region (three counties). Staff will invite Robert Ratner (County's Housing for Health) to an upcoming meeting.

5.4. District 4: No Report

5.5. District 5:

Childers reported that AT&T's plan to eliminate land lines in District 5 is causing some concern and fire season is also concerning. Childers also shared the results of a recent survey of MOW clients which indicated that those served are generally very satisfied.

6. Senior Legislature Report: None

7. Staff Report:

Staff reported that the County Auditor and the County Assessor would attend the August meeting to present on two items of interest to seniors.

8. Correspondence: None

9. Emerging Matters and Commissioner Announcements:

Chairs will review existing Strategic Action Plan and return to a future Commission meeting with recommended amendments.

10. Adjournment: Meeting adjourned at 2:14 PM.

Respectfully submitted by: Kaite McGrew, *Commissions Manager*



Santa Cruz County Seniors Commission

701 Ocean Street, Room 510, Santa Cruz, CA 95060
P: (831) 454-2772 F: (831) 454-2411 TTY/TDD 711
commissions@santacruzcounty.us
www.sccseniors.org

Meeting Minutes

DATE: Tuesday, August 20, 2024
TIME: 12:30 PM
LOCATION: United Way, 4450 Capitola Road, Ste 106, Capitola CA 95010
PRESENT: Dena Taylor (1st District), Suzanne Doty (Chair - 1st District), Mark Johannessen (2nd District), Lois Sones (3rd District), Alicia Rodriguez (3rd District), Patricia Fohrman (4th District), Katie Limas (Vice Chair - 4th District), Carol Childers (5th District)
EXCUSED: Antonio Rivas (2nd District)
ABSENT: None
STAFF: Kaite McGrew (Commissions Manager)
GUESTS: Edith Driscoll (County Auditor-Controller), Sheri Thomas (County Assessor-Recorder). No members of the public were present.

1. Call to Order/Roll Call/Agenda Review
Meeting convened at 12:33 PM.
2. **Motion to Approve June 18, 2024 Meeting Minutes**
Minutes revised to eliminate typographical errors.
Motion to approve minutes as amended.
Motion/Second: Taylor/Sones
Ayes: Taylor, Doty, Sones, Rodriguez, Limas and Childers
Abstentions: Johannessen
Motion passed.

3. Public Comment: None

Fohrman arrived.

4. New Business/Action Items:

4.1. Property Tax Issues Impacting Seniors

Driscoll provided an overview of tax information available to the public, including new features on the website (e.g., e-notifications, on-line applications for tax penalty cancellations (death, medical, etc.), as well as a new location in South County. Driscoll explained senior and disabled citizen exemptions and the various application deadlines. Contact information on the County website is always the most current.

4.2. Intrafamilial Property Transfers

Thomas provided an overview of services provided by the County Assessor's office and summarized property tax considerations such as transferable Prop 13 tax base, owner-occupied exemptions, disabled veterans exemptions, property reassessment parameters, and intrafamilial property transfer concerns including property tax accrual, and tax lien sales.

4.3. Commission Strategic Action Planning Update

Doty will facilitate an exercise with the Commission to help identify priorities once the Solutions Summit priorities have been published.

4.4. Solutions Summit Update

Doty reported that the Santa Cruz County Solutions Summit will be held on October 16 at the Mount Hermon Conference Center. Five bold goals (housing, health, inclusion and equity, caregiving, and affordable aging) have been established. Doty will request that the Commission is included on the invitation list.

5. District Reports

5.1. District 1

Doty reported attending a Village Santa Cruz event and suggested inviting them to present to the Commission to a future meeting. Taylor had no report.

5.2. District 2:

Johannessen reported on topics discussed during the recent *Area Agency on Aging* meeting which included hospice and Medicare eligibility, Senate Bill 1249, status of the Live Oak Senior Center, opposition to bond measure M and the upcoming Solutions Summit among others.

5.3. District 3:

Rodriguez recommended that hospice information to be included in any information shared with local hospital emergency rooms. She reported that data collected from the three senior surveys conducted recently (State Master Plan for Aging survey, AAA, and the County's "Age Well" survey) appear to contradict one another and suggested that invite speakers to provide additional detail. Sones met with Supervisor Cummings and confirmed his commitment to advancing the interests of County seniors.

5.4. District 4:

Fohrman, Doty and Rivas will serve on a panel reviewing CORE funding applications. Results will be released in September. The SEIU is providing an opportunity for IHSS workers to participate in a political training in Berkeley.

5.5. District 5: No Report

6. Senior Legislature Report: None

7. Staff Report:

Staff will invite Eva Holt-Rusmore to share information about compiling a "Senior Wellness Index" on the DataShareSCC health information website.

8. Correspondence: None

9. Emerging Matters and Commissioner Announcements:

Rodriguez will invite a speaker from *Serving Communities Health Information Organization* (SCHIO), a multi-stakeholder health information exchange.

10. Adjournment: Meeting adjourned at 2:15 PM.

Respectfully submitted by: Kaite McGrew, *Commissions Manager*