



**DIRECT CARE WORKFORCE CURRENT INVESTMENTS WEBINAR
FEBRUARY 1, 2022**

0:18 >> GOOD MORNING EVERYBODY AND WELCOME TO TODAY'S DIRECT CARE WORKFORCE INVESTMENTS WEBINAR HOSTED BY THE CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY AND THE CALIFORNIA LABOR AND WORKFORCE DEVELOPMENT AGENCY. WE'RE GOING TO GIVE PARTICIPANTS JUST A COUPLE OF MINUTES TO LOG IN BEFORE WE BEGIN.

0:53 WONDERFUL WELL JUST A COUPLE OF REMINDERS UH CLOSED CAPTIONING IS AVAILABLE. YOU SHOULD BE ABLE TO ENABLE CAPTIONS BY SELECTING THE LIVE TRANSCRIPT ICON ON YOUR ZOOM TOOLBAR.

1:04 AND UH JUST A QUICK REMINDER THAT YOU ARE WELCOME TO SUBMIT COMMENTS AND QUESTIONS TO THE Q AND A THERE'S AN ICON FOR THAT ON YOUR TOOLBAR. AS WELL AND WE'LL TRY TO GET TO AS MANY QUESTIONS AS WE CAN TODAY. UM AND UH THOSE THAT WE CAN'T GET TO WE'LL CIRCLE BACK AROUND.

1:24 AND WITH THAT I'D LOVE TO PASS IT ALONG TO UH DARCI.

1:31 OH THANKS MARIYA. ARE YOU ABLE TO HEAR ME OKAY? WONDERFUL.

1:36 WELCOME EVERYONE I'M SO EXCITED TO BE HERE TODAY WITH A GREAT GROUP OF FOLKS. GREAT GROUP OF PANELISTS. TO TALK ABOUT THE DIRECT CARE WORKFORCE. FOR THOSE OF YOU WHO I HAVE NOT YET MET: MY NAME IS DARCI DELGADO. I AM AN ASSISTANT SECRETARY WITH CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY AND I'M SO PROUD TO BE HERE TODAY TO REPRESENT OUR SECRETARY DR MARK GHALEY ALONGSIDE OUR LWDA COLLEAGUES TODAY TO REALLY HELP DEMONSTRATE JUST THE HIGHEST LEVEL OF COMMITMENT AND COLLABORATION THAT WE AND EFFORTS THAT WE ARE PUTTING FORWARD IN WHAT WE SAY IS THE WORKFORCE CRISIS THAT WE ARE CURRENTLY IN.

2:18 I PROBABLY AM PREACHING TO THE CHOIR WHEN I SAY THIS BUT THE ISSUES OF RECRUITMENT, WAGES, RETENTION, CULTURAL COMPETENCY AND THE DIRECT CARE WORKFORCE ARE NOT NEW AND ARE A CRISIS THAT WE ARE URGENTLY FACING THAT FRANKLY HAS BEEN EXACERBATED BY THE COVID 19 PANDEMIC.

2:38 THE PANDEMIC HAS REALLY UPENDED A LOT OF WHAT WE SEE IN THE DIRECT CARE WORKFORCE AND PLACED SIGNIFICANT STRAIN ON OUR SYSTEM WHICH WAS ALREADY QUITE FRAGMENTED. AND FOR THOSE ON THE CALL UM WE LIKELY CAN TURN TO YOU TO REALLY HELP EXPLAIN HOW YOU ARE SEEING THIS STRAIN DAILY. AND IF NOT DAILY EVEN HOURLY IN THE SETTINGS WHERE YOUR PROVIDERS

ARE SERVICING SOME OF CALIFORNIA'S MOST VULNERABLE CONSTITUENTS. AND SO TO TACKLE THIS ISSUE, THE MAIN GOAL AND WHAT WE'LL BE TALKING ABOUT TODAY, IS COLLABORATION. COLLABORATION FROM OUR FEDERAL PARTNERS, UM FROM US AT THE STATE LEVEL IN LOCAL COLLABORATION.

3:28 AND SO WE'RE HERE THIS MORNING. WE'RE GOING TO BE HIGHLIGHTING SOME IMPORTANT WORK THAT'S GOING ON BETWEEN LWDA AND CALHS AND WE'RE REALLY TRYING TO HELP STRATEGIZE AND LEVERAGE ALL OF THE LEVELS OF FUNDING THAT WE'VE BEEN SEEING COMING IN THAT REALLY IS UNPRECEDENTED IN THIS ARENA. AND SO THIS REALLY IS A MULTI-YEAR MULTI-PRONGED EFFORT TO REALLY TRY TO ELEVATE OUR DIRECT CARE WORKFORCE THROUGH A VARIETY OF STRATEGIES AND INVESTMENTS. AND SO WE HAVE A LOT OF GREAT PANELISTS THAT ARE GOING TO BE TALKING TODAY ABOUT SOME OF THE SOLUTIONS THAT ARE ALREADY UNDERWAY AS A RESULT OF THIS ADMINISTRATION'S BUDGET IN THE CURRENT YEAR.

4:10 AND ALSO FOCUSING ON WHERE WE WILL BE MOVING IN THE UPCOMING YEARS. AND REALLY THIS IS ONLY THE BEGINNING. THE GOVERNOR'S CURRENT PROPOSED BUDGET FOR 2022-23 TAKES EVEN ANOTHER STEP IN OFFERING A PROPOSED 1.7 BILLION DOLLARS IN INVESTMENTS TOWARDS NURSING, SOCIAL WORK, COMMUNITY HEALTH WORKERS, AND REALLY TRYING TO EXPAND CULTURAL COMPETENCY AND LANGUAGE ACCESS FOR A LOT OF OUR CARE PROVIDERS. AND WE UNDERSTAND THAT THE LEGISLATURE IS EQUALLY CONCERNED AND REALLY EAGER TO HELP FIND THOSE LONG-TERM SOLUTIONS IN THIS CRISIS.

4:47 BECAUSE WE KNOW THAT OUR STATE IS EXPERIENCING A MAJOR SHIFT IN DEMOGRAPHICS AND UM OUR PROJECTIONS TELL US THAT UH BY 2030 ONE IN FOUR CALIFORNIANS WILL BE AGED 60 OR OLDER. SO WE KNOW THAT THIS IS A CRISIS THAT WE NEED TO FACE HEAD ON TODAY. AND SO REALLY EXCITED ABOUT THE COLLABORATION UH WITH THE MASTER PLAN FOR AGING REALLY HELPING TO SERVE AS A CATALYST FOR THIS IMPORTANT WORK. AND NOW THAT WE'RE ENTERING THE SECOND YEAR OF THIS 10-YEAR BLUEPRINT, WE LOOK TO YOU ALL THE STAKEHOLDERS ON THE CALL FOR YOUR THOUGHTS IDEAS AND SUGGESTIONS. BECAUSE REALLY WE WANT TO EMPHASIZE THE COLLABORATIVE NATURE OF ALL OF THE EFFORTS THAT WE'RE GOING TO BE PUSHING FORWARD IN THE NEXT YEAR OR TWO.

5:32 AND SO BEFORE I HAND IT OVER TO MY PARTNER IN CRIME I MAY WANT TO JUST SET FORWARD TWO GOALS THAT WE HAVE FOR TODAY AND FOR THIS WORK IN GENERAL. AND THE FIRST IS TO SECURE THE FUTURE OF OUR DIRECT CARE WORKFORCE AND TO REALLY, SECONDLY, SUPPORT THE OLDER ADULTS, PEOPLE WITH DISABILITIES, AND THE FAMILIES WHO RELY ON THIS DIRECT CARE WORKFORCE FOR DAILY ASSISTANCE AND SUPPORT.

5:56 SO THANK YOU SO MUCH FOR HAVING ME. REALLY EXCITED TO HEAR FROM THIS PANEL AND TO HEAR FROM ALL THE STAKEHOLDERS ON THE CALL TODAY. SO I'M GOING TO HAND IT OVER TO ABBY. ABBY IS THE DEPUTY SECRETARY FOR OUR LABOR WORKFORCE DEVELOPMENT AGENCY WHO WILL BE PROVIDING A FEW MORE THOUGHTS ON THIS IMPORTANT ISSUE.

6:21 THANK YOU DARCI AND I AM SO PLEASED TO BE HERE TODAY ON BEHALF OF THE LABOR AND WORKFORCE DEVELOPMENT AGENCY AND SECRETARY NATALIE PALUGIAI BOTH TO TALK ABOUT THE EXCITING WORK THAT IS BEING DONE RIGHT NOW TO IMPLEMENT CURRENT INVESTMENTS IN THE DIRECT CARE WORKFORCE. AND ALSO TO HIGHLIGHT THE IMPORTANCE OF OUR GROWING

PARTNERSHIP IN COLLABORATION WITH CHHS. BOTH THE LABOR AGENCY AND THE HEALTH AND HUMAN SERVICE AGENCY RECOGNIZE THE FUNDAMENTAL CONNECTION BETWEEN THE QUALITY AND ACCESSIBILITY OF CARE AND GOOD CARE JOBS. AND OUR TWO AGENCIES HAVE MADE GREAT STRIDES TOWARD A MORE COORDINATED STRATEGIC AND EFFECTIVE APPROACH TO ADDRESSING THE CRISIS IN LONG-TERM CARE.

7:08 THE GROWING STRENGTH OF OUR PARTNERSHIP IS REFLECTED IN THE PRESENTATION YOU'LL SEE TODAY AND IN THE GROUND-BREAKING PROPOSAL DARCI STARTED EXPLAINING TO YOU THAT THE GOVERNOR HAS MADE FOR HISTORIC INVESTMENTS IN THE HEALTHCARE WORKFORCE IN THE 2022-2023 BUDGET.

7:28 WE BELIEVE THAT WORKING TOGETHER, OUR JOINT EXPERIENCE AND EXPERTISE CAN BE TRULY TRANSFORMATIVE. WE CAN BUILD A THRIVING DIRECT CARE WORKFORCE TOGETHER WITH ADVOCATES FOR THE COMMUNITIES WE SERVE AND WITH HIGH ROAD EMPLOYERS WHO KNOW THAT FAIRLY PAID AND WELL-TREATED WORKERS MAKE ALL THE DIFFERENCE IN PROVIDING QUALITY CARE.

7:50 BY RAISING THE FLOOR FOR DIRECT CARE WORK WE CAN MAKE PROGRESS TOWARD BRIDGING THE CARE WORKFORCE SHORTAGE AND THE FRANKLY UNACCEPTABLE INEQUITABLE GAPS IN LONG-TERM CARE THAT HARM OUR MOST VULNERABLE COMMUNITIES. WE TOGETHER HOLD A VISION FOR A CALIFORNIA IN WHICH DIRECT CARE WORKERS CAN EARN A FAMILY SUSTAINING WAGE AND TAKE ADVANTAGE OF MEANINGFUL PROGRESSIVE TRAINING OPPORTUNITIES WHERE THEY WILL NOT ONLY PROVIDE BETTER CARE, BUT ALSO CONTRIBUTE TO THEIR FAMILY'S WELL-BEING AND IN FACT THE STATE'S MORE EQUITABLE ECONOMIC WELL-BEING. I WOULD LIKE TO NOW INTRODUCE JULIA FERGUERRA MCDONOUGH.

8:38 JULIA IS A LONG-STANDING WORKERS RIGHTS ATTORNEY WHO WORKED FOR THE CALIFORNIA LABOR COMMISSIONER AND THEN JOINED THE LABOR AGENCY AS A LEADERSHIP AND GOVERNMENT FELLOW THROUGH THE OPEN SOCIETY FOUNDATION. SHE IS CONTINUING HER WORK ON THE LONG-TERM CARE WORK WORKFORCE THROUGH THE GENEROUS SUPPORT OF THE BLUE SHIELD FOUNDATION. AND I WANT TO ACKNOWLEDGE HER RESEARCH, HER DILIGENCE, HER VISION, AND HER LEADERSHIP IN PREPARING FOR TODAY'S WEBINAR. AND SO JULIA LET ME TURN THIS OVER TO YOU TO GIVE SOME BACKGROUND AND CONTEXT ON THE DIRECT CARE WORKFORCE.

9:16 THANK YOU SO MUCH ABBY AND GOOD MORNING EVERYBODY. BEFORE LAUNCHING INTO THE SPECIFIC CURRENT INVESTMENTS IN THE LONG-TERM SERVICES AND SUPPORTS DIRECT CARE WORKFORCE, WE'D LIKE TO PROVIDE SOME BACKGROUNDS ON THE DIRECT CARE SECTOR.

9:28 FOR CONTEXT WE'LL BE EMAILING A COPY OF THIS PRESENTATION TO EVERYONE WHO REGISTERED AND THE LINK WILL ALSO BE AVAILABLE ON THE DEPARTMENT OF AGING WEBSITE UNDER HIGHLIGHTS. THERE'S ALSO AN INDEX OF KEY TERMS AND ACRONYMS. THIS IS AN ACRONYM HEAVY FIELD AT THE END OF THE SLIDE DECK FOR FUTURE REFERENCE. FIRST A HIGH-LEVEL OVERVIEW OF WHERE DIRECT CARE WORK IS PERFORMED AND WHO PAYS FOR IT.

9:54 WE KNOW THAT BY 2030 WE'LL BE FACING A SHORTAGE OF FROM 600,000 TO 3.2 MILLION PAID DIRECT CARE WORKERS IN CALIFORNIA.

10:00 THERE'S OF COURSE A LARGE NUMBER OF UNPAID FAMILY CAREGIVERS IN CALIFORNIA AS WELL. THEY'RE FACING THEIR OWN CHALLENGES. BUT TODAY'S PRESENTATION IS GOING TO FOCUS ON THE PAID DIRECT CARE WORKFORCE.

10:11 THESE WORKERS PROVIDE CARE IN A VARIETY OF SETTINGS. ONE CATEGORY IS HOME CARE INCOME ELIGIBLE INDIVIDUALS GENERALLY MEANING PEOPLE WHO QUALIFY FOR MEDI-CAL CAN RECEIVE CARE AT HOME THROUGH THE IN-HOME SUPPORTIVE SERVICES PROGRAM KNOWN AS IHSS IT'S A PROGRAM RUN BY THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES AND EACH COUNTY'S PUBLIC AUTHORITY.

10:34 THE BLUE SHADING ON THE SLIDE AND IN THIS BOX INDICATES PUBLIC PAY. WHILE THE GREEN ELSEWHERE INDICATES PRIVATE PAY. DIRECT CARE WORKERS CAN ALSO PROVIDE CARE THROUGH PRIVATE HOME CARE AGENCIES. THERE ARE LIMITED NUMBER OF MEDI-CAL HOME AND COMMUNITY-BASED WAIVERS THAT ARE AVAILABLE TO INCOME ELIGIBLE INDIVIDUALS TO PAY FOR HOME CARE. BUT THE MAJORITY OF HOME CARE AGENCIES RELY ON PRIVATE PAY CLIENTS. THEN THERE'S THE GRAY MARKET WHERE INDIVIDUALS OR THEIR FAMILY MEMBERS HIRE CAREGIVERS DIRECTLY OUTSIDE OF AN AGENCY. OFTEN PAYING OFF THE BOOKS OR UNDER THE TABLE.

11:03 THERE ARE A WIDE RANGE OF PUBLICLY FUNDED SERVICES PROVIDED IN BOTH HOME AND COMMUNITY-BASED SETTING AIMED AT ALLOWING INDIVIDUALS TO STAY IN THEIR HOMES AND COMMUNITIES AS LONG AS POSSIBLE. AGAIN PAID FOR BY HOME AND COMMUNITY-BASED MEDICAL WAIVERS. SOME EXAMPLES ARE THE PROGRAMS LISTED HERE SUCH AS THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY ALSO KNOWN AS CASE AND COMMUNITY-BASED ADULT SERVICES ALSO KNOWN AS CBAS. THESE ARE JUST A FEW EXAMPLES OF A WIDE RANGE OF THESE HOME AND COMMUNITY BASED OFTEN REFERRED TO AS HCBS PROGRAMS.

11:36 WE ALSO HAVE CARE PROVIDED IN CONGREGATE OR GROUP RESIDENTIAL SETTINGS WHICH FALLS INTO TWO MAIN CATEGORIES. THERE ARE ASSISTED LIVING FACILITIES INCLUDING BOTH RESIDENTIAL CARE FACILITIES FOR THE ELDERLY AND ADULT RESIDENTIAL FACILITIES FOR INDIVIDUALS WHO MAY NEED 24-HOUR ASSISTANCE, BUT NOT NECESSARILY MEDICAL CARE RESIDENTIAL CARE.

11:56 FACILITIES FOR THE ELDERLY ARE ARE REFERRED TO AS RCFES AND THEY'RE FOR INDIVIDUALS OVER 60. THEY RANGE IN SIZE FROM SMALL SIX BED BOARDING CARES TO MUCH LARGER FACILITIES THAT MAY HOUSE 100 OR MORE INDIVIDUALS.

12:10 THESE FACILITIES ARE PRIMARILY PRIVATE PAY. BUT THERE ARE ALSO A LIMITED NUMBER OF MEDICAL ASSISTED LIVING WAIVERS AVAILABLE TO INCOME ELIGIBLE INDIVIDUALS. ADULT RESIDENTIAL FACILITIES ALSO KNOWN AS ARTS ARE FOR THOSE UNDER 60 AND THEY CAN BE SUBSIDIZED THROUGH VARIOUS GOVERNMENT PROGRAMS INCLUDING DISABILITY AND REGIONAL CENTER. WE ALSO HAVE MEDICAL FACILITIES UH JUST YES THANK YOU WE ALSO HAVE MEDICAL FACILITIES WITH SKILLED NURSING FACILITIES PROVIDING THE HIGHEST LEVEL OF CARE AND INTERMEDIATE CARE FACILITIES PROVIDING AS THE NAME SUGGESTS, AN INTERMEDIATE LEVEL OF CARE.

12:45 FIELD NURSING FACILITIES ARE OFTEN REFERRED TO AS SNFS AND INTERMEDIATE CARE FACILITIES ARE OFTEN REFERRED TO AS ICS. BOTH ARE PRIMARILY PUBLIC FUNDING. NEXT SLIDE PLEASE. MOVING ON TO THE TYPE OF WORK FOR FORM AND HOW THAT WORK IS CATEGORIZED. PERSONAL CARE ASSISTANCE OR PERSONAL CARE OR PCAS ARE THE LARGEST GROUP.

13:05 THEY PROVIDE ASSISTANCE WITH ACTIVITIES OF DAILY LIVING REFERRED TO AS ADLS LIKE EATING DRESSING BATHING AND TOILETING.

13:12 THEY OFTEN ALSO PROVIDE ASSISTANCE WITH WHAT ARE CALLED IADLS INTERMEDIATE ACTIVITIES OF DAILY LIVING SUCH AS HOUSEKEEPING, MEAL PREP AND MEDICATION MANAGEMENT. PERSONAL CARE ASSISTANTS WORK IN ALL SETTINGS HOME, CONGREGATE AND COMMUNITY AND REQUIRED TRAINING VARIES BY PROGRAM. IHSS WORKERS FOR EXAMPLE FALL INTO THIS CATEGORY AND ARE REQUIRED TO ATTEND AN ORIENTATION CERTIFIED NURSING ASSISTANT OFTEN REFERRED TO AS CNAS, ALSO ASSIST WITH ADLS AND IADLS IN ADDITION TO GENERAL PATIENT CARE AND SOME CLINICAL TASKS LIKE FOR EXAMPLE BLOOD PRESSURE READINGS AND RANGE OF MOTION EXERCISES.

13:48 THEY WORK UNDER THE SUPERVISION OF LICENSED MEDICAL OR NURSING STAFF PRIMARILY IN CONGREGATE SETTINGS SUCH AS SKILLED NURSING FACILITIES OR HOSPITALS AND CNA'S MUST COMPLETE 60 HOURS OF CLASSROOM TRAINING PLUS 100 HOURS OF SUPERVISED CLINICAL TRAINING. HOME HEALTH AIDES PROVIDE ESSENTIALLY THE SAME SERVICES AND CARE AS DNAS BUT IN HOME OR COMMUNITY SETTINGS. THEY ALSO WORK UNDER THE SUPERVISION OF A LICENSED NURSE OR THERAPIST AND ARE REQUIRED TO COMPLETE 120 HOURS OF TRAINING.

14:20 DIRECT SUPPORT PROFESSIONALS DO VERY SIMILAR WORK TO PERSONAL CARE AID IN ADDITION TO HELPING DEVELOP BEHAVIORAL MANAGEMENT PLANS AND MANAGING MEDICAL RECORDS OR INDIVIDUALS WITH INTELLECTUAL OR DEVELOPMENTAL DISABILITIES. THEY CAN WORK IN BOTH CONGREGATE AND COMMUNITY SETTINGS AND MUST COMPLETE 70 HOURS OF TRAINING. NEXT SLIDE PLEASE.

14:38 SO MOVING ON FROM WHAT THE WORK IS AND WHERE IT IS PERFORMED. LET'S TALK A LITTLE BIT ABOUT WHO DOES THIS WORK. DIRECT CARE WORKERS ARE OVERWHELMINGLY WOMEN OF COLOR AND IN CALIFORNIA, 80 PERCENT ARE WOMEN AND 47 PERCENT ARE IMMIGRANTS. CLOSE TO 40 PERCENT OF THE WORKFORCE IS LATINX, WHILE ASIAN PACIFIC ISLANDER AND BLACK WORKERS MAKE UP 25 AND 12 OF THE WORKFORCE RESPECTIVELY.

15:03 FOR ASIAN PACIFIC ISLANDER WORKERS THEY ARE REPRESENTED AT JUST UNDER TWO TIMES THEIR STATEWIDE POPULATION WHILE BLACK DIRECT CARE WORKERS ARE REPRESENTED IN THE SECTOR AT OVER DOUBLE THEIR REPRESENTATION IN THE STATE. DIRECT CARE WORKERS EARN SO LITTLE THAT OVER HALF OF THEM QUALIFY FOR PUBLIC BENEFITS. NEXT SLIDE PLEASE.

15:27 FOR A SENSE OF PERSPECTIVE WE CAN LOOK AT THE MEAN WAGES REPORTED FOR THE FIRST QUARTER OF 2021 IN CALIFORNIA.

15:34 WE SEE THAT DIRECT CARE WORKERS EARN SIGNIFICANTLY LESS THAN GARDENERS HOUSEKEEPERS AND SHORT ORDER COOKS.

15:41 NEXT LIKELY HERE WE CAN SEE THAT WAGES FOR DIRECT CARE WORKERS HAVE NOT KEPT PACE WITH THE ASTRONOMICAL GROWTH AND DEMAND FOR CARE. IN THE LAST DECADE IN CALIFORNIA THE NUMBER OF PERSONAL CARE AID AND HOME HEALTH AIDE JOBS HAS RISEN BY 473 PERCENT. ALTHOUGH CNA GROWTH HAS BEEN SOMEWHAT SLOWER MOST LIKELY DUE TO ACCESSIBILITY TRAINING AND CERTIFICATION THE OVERALL GROWTH RATE FOR ALL DIRECT CARE JOBS WAS 130 PERCENT. WAGES BY CONTRAST HAVE BARELY RISEN AT ALL.

16:10 CNA SAW THE GREATEST INCREASE OF A LITTLE LESS THAN TWO DOLLARS AND 25 CENTS AN HOUR SINCE 2010 WHILE WAGES FOR PERSONAL CARE ASSISTANCE AND HOME HEALTH AIDS ROSE JUST ONE DOLLAR AND 40 CENTS. AND FOR ALL DIRECT CARE WORKERS GENERALLY ONLY 35 CENTS IN THE LAST 10 YEARS.

16:27 NEXT LIKELY THINKING LOOKING TOWARD THE FUTURE IN CALIFORNIA WHAT WOULD BE THE IMPACT ON BOTH OUR ECONOMY AND OUR HEALTH OF IMPROVING WAGES AND WORKING CONDITIONS. ESTIMATES OF A LIVING WAGE IN CALIFORNIA VARY DEPENDING ON A VARIETY OF FACTORS INCLUDING REGION AND HOUSEHOLD SIZE BUT NEVER FALL BELOW APPROXIMATELY 18 AN HOUR. SO ASSUMING PAYMENT OF A LIVING WAGE STARTING NOW IN 2030 CALIFORNIA WOULD SEE THREE POINT BY 2030. EXCUSE ME CALIFORNIA WOULD SEE 3.6 MILLION DOLLARS ADDITIONAL.

17:00 ECONOMIC OUTPUT 165 MILLION IN PUBLIC ASSISTANCE SAVINGS 1.3 BILLION SAVED IN TURNOVER COSTS AN INCREASE UM IN STAFFING UH 17 TO 21 INCREASE IN RETENTION AND FEWER ER VISITS AND HOSPITALIZATIONS AND GENERALLY IMPROVE PATIENT SAFETY AND HEALTH IN ADDITION TO OVER 50 000 SUSTAINABLE AND VERY BADLY NEEDED DIRECT CARE JOBS.

17:32 WITH THAT IN MIND WE TURN TOWARD OUR EXCITING CURRENT INVESTMENTS IN A THRIVING DIRECT CARE WORKFORCE.

17:39 NEXT SLIDE PLEASE ONE MORE.

17:45 THANK YOU WE HAVE A TOTAL OF 946.4 MILLION INVESTED IN THIS FOR THIS FISCAL YEAR JUST SHY OF A BILLION. THAT'S OVER 400 MILLION INVESTED IN PERSONAL CARE ASSISTANCE, 120 MILLION IN CNAS AND HOME HEALTH AIDS 100 MILLION FOR THE PATH PROGRAM AND JUST OVER 100 MILLION FOR DIRECT SUPPORT PROFESSIONALS. THESE INVESTMENTS ARE PRIMARILY IN HOME AND COMMUNITY-BASED CARE WITH 70 ALLOCATED FOR RESIDENTIAL CARE AND 10 FOR PROGRAMS THAT SPAN BOTH SETTINGS. WE'VE ALSO INCLUDED A BREAKDOWN HERE OF FUNDING BY LEAD DEPARTMENT. IN JUST A MOMENT EACH DEPARTMENT WILL PROVIDE MORE DETAIL ON THE INITIATIVES THEY ARE TAKING THE LEAD ON.

18:28 FIRST A QUICK OVERVIEW. I'M GOING TO MOVE THROUGH THESE NEXT FEW SLIDES QUICKLY BUT PLEASE DON'T WORRY WE'LL RETURN TO THEM WHEN WE GO OVER THE DETAILS OF EACH INITIATIVE. FOR PERSONAL CARE ASSISTANCE THERE ARE TWO MAIN INVESTMENTS.

18:40 295.1 MILLION TO BE ADMINISTERED BY THE DEPARTMENT OF SOCIAL SERVICES FOR IHSS.

18:46 LONG-TERM CARE CAREER PATHWAYS AN ADDITIONAL 137 MILLION INVESTMENT MEANS THIS PROGRAM WILL INCLUDE PAYMENT OF HOURLY WAGES FOR TIME AND TRAINING AS WELL AS ADDITIONAL INCENTIVE PAYMENTS THAT ARE STILL UNDER DEVELOPMENT. 150 MILLION DOLLARS INVESTED IN NON-IHSS HOME AND COMMUNITY-BASED WORKERS WILL GO TOWARD TRAINING OF A WIDE RANGE OF WORKERS INCLUSIVE OF BUT NOT NECESSARILY LIMITED TO DIRECT CARE WORKERS. AN ADDITIONAL 12.5 MILLION DOLLARS IS ALLOCATED UNDER THIS PROGRAM FOR STIPENDS. NEXT SLIDE PLEASE.

19:22 THERE ARE THREE LARGE INVESTMENTS IN THE CNA WORKFORCE. 45 MILLION TO THE DEPARTMENT OF HEALTHCARE ACCESS INFORMATION ALSO KNOWN AS HCAI TO TRAIN CNAS WORKING AT SKILLED NURSING FACILITIES WHILE PROVIDING SCHOLARSHIPS STIPENDS AND GRANTS AND AMOUNTS STILL TO BE DECIDED. 14.5 MILLION TO THE LABOR AND WORKFORCE DEVELOPMENT

AGENCY ALSO KNOWN AS LWDA TO EXPAND DNA APPRENTICESHIPS AND DEVELOP A CNA TO LICENSE VOCATIONAL NURSE APPRENTICESHIP PATHWAY IN SKILL NURSING FACILITIES. HCAI ALSO RECEIVED 75 MILLION TO INVEST IN THE CLINICAL HOME AND COMMUNITY-BASED WORKFORCE INCLUSIVE OF CNAS

20:01 AND HOME HEALTH AIDES AND ALSO LICENSED VOCATIONAL NURSES AND RNS THE INVESTMENTS IN DIRECT SUPPORT PROFESSIONALS ARE UNIQUE AND THAT THEY ARE ONGOING STARTING WITH 7.9 MILLION THIS YEAR FOR TWO INITIATIVES.

20:14 A THREE-TIERED TRAINING AND CERTIFICATION PROGRAM THAT WILL BE TIED TO TIERED WAGE DIFFERENTIALS AND A BILINGUAL PAY DIFFERENTIAL. LAST BUT NOT LEAST WE HAVE THE PROVIDING ACCESS AND TRANSFORMING HEALTH ALSO KNOWN AS PATH PROGRAM. NEXT SLIDE PLEASE. AS CALIFORNIA EXPANDS THE SYSTEM OF CARE FOR UNHOUSED PEOPLE ALONG WITH ENHANCED CARE MANAGEMENT AND LONG-TERM SERVICES AND SUPPORTS THROUGH CALLING'S RECONFIGURE COMMUNITY SUPPORTS LOCAL GOVERNMENTS AND COMMUNITY-BASED ORGANIZATIONS WILL BE TASKED WITH IMPLEMENTING THESE PROGRAMS AND WILL NEED TO RECRUIT AND ONBOARD AND TRAIN WORKERS WITH EXPERIENCE SERVING AGING DISABLED UNHOUSED AND FORMERLY UNHOUSED INDIVIDUALS.

20:54 THAT IS WHERE THE PATH PROGRAM COMES IN WITH A HUNDRED MILLION DOLLAR MULTI-YEAR INVESTMENT IN TRAINING THIS NEW WORKFORCE INCLUDING FUNDS FOR TRAINING STIPENDS. NOW I'LL TURN IT OVER TO DIRECTOR SUSAN DEMAROIS OF THE DEPARTMENT OF AGING WHO WILL START OFF OUR DEPARTMENT UPDATES.

21:09 THANK YOU SO MUCH JULIA. THANK YOU FOR THAT COMPREHENSIVE OVERVIEW AND THANK YOU FOR YOUR COMMITMENT TO THE DIRECT CARE WORKFORCE THROUGHOUT THE MASTER PLAN FOR AGING PROCESS AND ALL YOUR PREPARATION TODAY.

21:23 I'M REPRESENTING THE DEPARTMENT OF AGING TODAY AND I WANTED TO QUICKLY RECAP HOW WE ARRIVED AT TODAY'S WEBINAR AND WHY.

21:30 THIS ISSUE IS SO CRITICAL AND TIMELY. THIS MAY BE A REFRESHER FOR MANY OF YOU ON THE WEBINAR BUT FOR THOSE WHO ARE NEW, IN JUNE OF 2019 GOVERNOR NEWSOM ISSUED AN EXECUTIVE ORDER CALLING FOR A MASTER PLAN FOR AGING. HE ACKNOWLEDGED THEN THAT MEANINGFUL CHOICE FOR OLDER ADULTS AND PEOPLE WITH DISABILITIES REQUIRES ACCESS TO A BROAD RANGE OF SUPPORTS INCLUDING WORKFORCE.

21:56 AT THAT TIME THE GOVERNOR ACKNOWLEDGED THE ESSENTIAL ROLE OF DIRECT CARE WORKERS AND NOTED THE INCREASING DEMAND FOR HOME AND COMMUNITY-BASED CARE. HE ALSO TOOK PRIDE IN CALIFORNIA BEING A LEADER IN A WIDE RANGE OF SERVICES AND SUPPORTS INCLUDING IHSS CBAS MSSP AND REGIONAL CENTERS TO NAME JUST A FEW. BY MARCH OF 2020 THE MASTER PLAN'S LTSS LONG-TERM SERVICES AND SUPPORTS SUBCOMMITTEE PRODUCED THEIR REPORT. THEY FOCUS SPECIFICALLY ON HIGH-VALUE HIGH-QUALITY WORKFORCE ALONG WITH NAVIGATION ACCESS TO SERVICES AFFORDABILITY AND LEADERSHIP.

22:38 AND THEN ONE YEAR AGO THE MASTER PLAN FOR AGING WAS OFFICIALLY LAUNCHED WITH FIVE BOLD GOALS GOAL FOUR BEING CAREGIVING THAT WORKS

22:49 GOAL FOUR INCLUDES INITIATIVES TARGETING BOTH THE PAID CAREGIVER WORKFORCE AND UNPAID FAMILY FRIEND CAREGIVERS. RECOGNIZING THAT ALL OF THESE CAREGIVERS WHETHER PAID OR UNPAID ARE THE BACKBONE OF OUR SERVICE DELIVERY SYSTEM.

23:05 TODAY'S DISCUSSION WILL FOCUS ON THE INITIATIVES TARGETING OUR PAID DIRECT CARE WORKFORCE AND AS SUCH DOES NOT HIGHLIGHT THE MANY IMPORTANT INITIATIVES UNDERWAY TO SUPPORT UNPAID FAMILY CAREGIVERS.

23:18 TODAY'S FOCUS IS DIRECT CARE FRONTLINE WORK. I ALSO WANT TO NOTE THAT THERE ARE ADDITIONAL SPECIALIZED GERIATRIC AND DEMENTIA TRAINING INITIATIVES IN THE MASTER PLAN AND WHILE WE WON'T BE FOCUSING ON THOSE DURING TODAY'S WEBINAR CDA LOOKS FORWARD TO PARTNERING ON ALL OF THESE INITIATIVES IN THE MONTHS AHEAD.

23:42 FOR THE PAID CAREGIVERS MASTER PLAN STAKEHOLDERS SET A TARGET OF ONE MILLION HIGH QUALITY CAREGIVING JOBS. TO GET THERE WE NEED TO MAXIMIZE EXISTING STAFF SYSTEMS AND STRUCTURES AND BUILD ENTIRELY NEW PATHWAYS TO WORK. THIS MORNING I WANT TO EXPRESS APPRECIATION TO THE GOVERNOR AND THE STATE LEGISLATURE FOR APPROVING CALIFORNIA'S FOCUSED INVESTMENTS IN THE DIRECT CARE WORKFORCE. THIS IS THE START OF CONVERSATIONS THAT WILL CONTINUE FOR YEARS TO COME UNTIL WE ACHIEVE THE BOLD GOALS SET FORTH IN THE EXECUTIVE ORDER MASTER PLAN AND LTSS SUBCOMMITTEE REPORT.

24:25 TO GET TO THE CALIFORNIA DEPARTMENT OF AGING'S ROLE IN THE WORKFORCE ECOSYSTEM LAID OUT SO BEAUTIFULLY BY JULIA. FOCUS ON MEDI-CAL HCVS SETTINGS SUCH AS COMMUNITY-BASED ADULT SERVICES CBAS CENTERS PACE THE PROGRAM FOR ALL-INCLUSIVE CARE FOR THE ELDERLY MULTI-PURPOSE SENIOR SERVICES PROGRAM OR MSSP AND THE BACKBONE OF MEDICAID HOME AND COMMUNITY LIVING WHICH INCLUDES HOME CARE HOME HEALTH AIDES AND PRIVATE DUTY NURSING.

25:01 WE CONTINUE TO SEE THROUGH THE ONGOING COVID 19 PANDEMIC THAT THESE HOME AND COMMUNITY-BASED SERVICES AND SUPPORTS ARE VITAL TO OLDER ADULTS AND PEOPLE WITH DISABILITIES.

25:12 OUR FUNDING AT CDA 150 MILLION DOLLARS ALLOWS FOR TRAINING AND STIPENDS TO RECRUIT RETAIN AND PROMOTE STAFF. WE ARE CENTERED IN EQUITY AND WILL EMPHASIZE LANGUAGE ACCESS AND CULTURAL COMPETENCE. WE ARE ALSO COMMITTED TO IMPROVING THE EASE AND ACCESS TO TRAINING THROUGH ADULT AND WEB-BASED LEARNING MODALITIES IN MULTIPLE LANGUAGES WITH OPPORTUNITIES FOR INNOVATION ALONG WITH LEARNING AND LEADERSHIP ADVANCEMENT.

25:49 OUR GOALS ARE THREE-FOLD: BUILD DIRECT CARE WORKFORCE CAPACITY EXPAND HOME AND COMMUNITY INFRASTRUCTURE THROUGHOUT THE STATE AND DELIVER ON THE GOVERNOR'S VISION OF MORE OPTIONS FOR MORE PEOPLE TO ACHIEVE THIS GOAL. CDA IN CONSULTATION WITH THE CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY AND OUR PARTNERS AT THE LABOR AGENCY WE'RE ACTIVELY DEVELOPING A WORK PLAN AND TIMELINE FOR THE ROLLOUT OF THIS INITIATIVE.

26:14 IN THE FALL WE ENGAGE THE CENTER FOR HEALTH CARE STRATEGIES TO PROVIDE A HIGH-LEVEL OVERVIEW OF THE ELIGIBLE SETTINGS SPECIFIC JOB TITLES AND THE ALLOWABLE USE OF FEDERAL AND STATE DOLLARS

26:27 THIS OVERVIEW CONSIDERED MODEL PROGRAMS FROM OTHER STATES. AS WELL I WANT TO THANK EVERYONE WHO'S ON THIS CALL WHO CONTRIBUTED TO THE DOZENS OF STAKEHOLDER INTERVIEWS CONDUCTED LATE LAST YEAR. THE CENTER FOR HEALTHCARE STRATEGIES REPORT WILL BE FINAL IN MARCH AND WE'LL WE'RE EAGER TO SHARE THAT WITH ALL OF YOU.

26:47 EARLIER THIS MONTH CDA WAS THRILLED TO BRING ON SARAH STEENHAUSEN AS THE DEPARTMENT'S FIRST DEPUTY DIRECTOR OF AGING POLICY RESEARCH AND EQUITY. SARAH JOINS US FROM THE SCAN FOUNDATION WHERE SHE WAS A KEY DRIVER OF THE MASTER PLAN FOR AGING. SARAH WILL BE LEADING CDA'S WORKFORCE INITIATIVES AND SHE BRINGS A WIDE NETWORK AND KNOWLEDGE TO OUR DEPARTMENT WITH PHILANTHROPIC SUPPORT FROM FOUNDATION PARTNERS. CDA HAS ENGAGED WITH A CONSULTANT TO DEVELOP OUR WORK OUR WORK PLAN IN CLOSE COLLABORATION WITH STAKEHOLDERS. WE ARE EMBARKING ON A MULTI-PRONGED MULTI-YEAR APPROACH

27:24 FIRST PROVIDING IMMEDIATE RELIEF TO WORKERS WHO HAVE ENDURED THROUGH THE PANDEMIC. WE ARE EXAMINING HOW TO STAND UP A STIPEND PROGRAM THIS YEAR THAT REINFORCES THE VALUE AND IMPORTANCE OF THIS SECTOR.

27:37 WE WANT TO ASSURE OUR HCDS PROVIDERS THAT THEIR CONTRIBUTIONS IN THE HOME AND IN THE HOME AND IN THE COMMUNITY ARE ESSENTIAL. SECOND CATALOGING TRAINING ASSETS AND GAPS TO DEVELOP CONSISTENT HIGH QUALITY STANDARDIZED STANDARDIZED TRAINING THAT IS FREE AND ACCESSIBLE STATEWIDE. WE WANT TO BE A RESOURCE TO OUR NETWORK OF HOME AND COMMUNITY BASED PROVIDERS

28:03 TO FREE THEM UP TO DELIVER CARE AND CONNECTIONS TO OLDER ADULTS AND PEOPLE WITH DISABILITIES. THIRD EXPLORING OVERLOOKED OR EMERGING JOB CATEGORIES TO ENSURE THE DIRECT CARE WORKFORCE INCLUDES ALL JOB TYPES AND MAXIMIZES OPPORTUNITIES FOR ADVANCEMENT.

28:22 ADVANCEMENT AS WE LOOK FORWARD TO A STATEWIDE NO WRONG DOOR NETWORK WE SEE POTENTIAL WORKFORCE OPPORTUNITIES ON THE HORIZON FOR AREA AGENCIES ON AGING AGING AND DISABILITY RESOURCE RE RESOURCE CONNECTIONS AND INDEPENDENT LIVING CENTERS. FOURTH SUSTAINING THIS WORK THROUGH AN ONLINE LEARNING MANAGEMENT SYSTEM THAT WILL EXTEND BEYOND THE SHORT-TERM WINDOW OF STATE AND FEDERAL FUNDING.

28:48 AT CDA WE'RE COMMITTED TO LEADERSHIP LEARNING AND INNOVATION WELL BEYOND 2024

28:54 AND FINALLY EVALUATING THE WORK AND LEARNING FROM THESE SHORT-TERM INVESTMENTS WHEN WE LOOK BACK IN 2025 WE WANT TO BE BETTER AS A DEPARTMENT AND AS A STATEWIDE HOME AND COMMUNITY-BASED NETWORK

29:06 MOST OF ALL WE WANT TO APPLY THE LESSONS LEARNED FROM OUR WORKFORCE PROVIDERS AND STATE PARTNERS TO TRULY IMPROVE THE QUALITY OF CARE AND QUALITY OF LIFE FOR OLDER ADULTS AND PEOPLE WITH DISABILITIES. THIS IS THE START OF THE CONVERSATION. WE WANT TO HEAR FROM YOU THROUGHOUT THE PROCESS AS IT UNFOLDS AND WE LOOK FOR ADDITIONAL WAYS TO ENGAGE WITH YOU AND WITH CDA STARTING THIS SPRING. SO I WILL NOW TURN WE WILL BE HEARING UM IN SUCCESSION FROM ALL OF THE DEPARTMENTS THAT HAVE A ROLE IN THIS DIRECT CARE WORKFORCE ECOSYSTEM AND I'M HAPPY NOW TO TURN THE PROGRAM OVER TO CLAIRE RAM CLAIRE RAMSEY WHO IS REPRESENTING THE DEPARTMENT OF SOCIAL SERVICES WELCOME CLAIRE

29:56 THANKS SO MUCH DIRECTOR AND HAPPY TO BE WITH EVERYONE HERE TODAY. UM I'M GOING TO BE TALKING SPECIFICALLY ABOUT OUR IN-HOME SUPPORTIVE SERVICES PROGRAM WHICH IS THE LARGEST PERSONAL CARE PROGRAM IN THE STATE AND CURRENTLY HAS OVER 555 000 PROVIDERS STATEWIDE. THERE ARE TWO MAJOR INITIATIVES INVOLVING THE WORKFORCE THAT ARE MOVING FORWARD AT CDSS. THE FIRST IS 137 MILLION DOLLAR CARE ECONOMY PAYMENT STIPEND UM AND THAT IS BASICALLY OUR VERSION OF WHAT DIRECTOR DEMAROIS JUST TALKED ABOUT. UM OUR PAYMENTS ARE 500 AND THEY ACTUALLY ARE BEING PAID OUT NOW.

30:36 SO SOME OF YOU IF YOU OUR IHSS PROVIDERS MAY HAVE ALREADY RECEIVED THAT PAYMENT UM THOSE WILL BE ONE-TIME PAYMENTS AND THEY'RE BASICALLY BEING PROVIDED TO ANYONE WHO WORKED AT LEAST TWO MONTHS AS AN IHSS PROVIDER BETWEEN MARCH 2020 AND MARCH 2021

30:54 AND THIS WAS REALLY IN RECOGNITION OF THE EXTRAORDINARY WORK THAT WAS DONE UH DURING THE FIRST YEAR OF THE PANDEMIC FOR WHICH THE DEPARTMENT IN THE STATE IS EXTREMELY THANKFUL AND WE KNOW THAT IT KEPT MANY MANY PEOPLE SAFE HEALTHY AND ALIVE UM DURING THOSE FIRST THAT FIRST YEAR OF THE PANDEMIC. SO THAT WILL BE CONCLUDED SOON BECAUSE THOSE PAYMENTS ARE BEING ISSUED NOW.

31:26 THE SECOND IS AN ONGOING INITIATIVE THAT WE'RE CALLING IHSS CAREER PATHWAYS. AND CAREER PATHWAYS IS A ONE-TIME INVESTMENT TO CREATE A TRAINING PROGRAM FOR IHSS AND WAIVER PERSONAL CARE SERVICE PROVIDERS. ALSO REFERRED TO SOMETIMES AS WPCS PROVIDERS.

31:39 AND THAT'S TO INCREASE THE QUALITY OF CARE IN IHSS TO HELP US RECRUIT AND RETAIN PROVIDERS FOR RECIPIENTS AND TO PROVIDE FOUNDATIONAL TRAINING THAT CAN BE USED NOT ONLY TO PROVIDE SERVICES TO IHSS AND WPCS RECIPIENTS BUT ALSO TO LEAD TO FURTHER OPPORTUNITIES IN THE HEALTHCARE FIELD OR IN SOCIAL WORK IF THAT'S A DESIRED PATHWAY FOR THAT EMPLOYEE. SO WE'RE VERY EXCITED. THIS IS NEW FOR US. THE STATE HAS NOT GENERALLY DONE UM STATEWIDE TRAINING IN THIS WAY FOR IHSS PROVIDERS.

32:13 WE ARE MOVING ALONG IN THIS INITIATIVE SO WE ACTUALLY DID PASS STATUTORY LANGUAGE UM RIGHT AT THE END OF THE BUDGET SESSION LAST YEAR AND THAT HAS GIVEN US SOME PATHWAYS TO TO MOVE FORWARD ON IN OUR TRAINING PROGRAM UM AND RIGHT NOW THERE ARE FIVE PATHWAYS.

32:32 THERE ARE TWO GENERAL PATHWAYS. UH THE FIRST IS A GENERAL HEALTH AND SAFETY PATHWAY THAT INCLUDES WILL INCLUDE THINGS LIKE FIRST AID INFECTION CONTROL EMERGENCY AND DISASTER PREPAREDNESS FOOD SAFETY UM AND THEN WE WILL THE SECOND PATHWAY IN THE BASIC UH PATHWAY IS FOR ADULT EDUCATION SO THAT COULD BE THINGS LIKE ENGLISH FOR UH LANGUAGE ENGLISH LANGUAGE LEARNERS COMPUTER AND DIGITAL LITERACY MATH AND FINANCIAL LITERACY

33:04 UM SO THOSE PATHWAYS LIKE I SAID FORM OUR GENERAL PATHWAYS AND WE THINK THOSE CAN BOTH BE USED AS FOUNDATIONAL FOR IHSS PROVIDERS BUT ALSO IF PEOPLE ARE INTERESTED IN MOVING INTO OTHER CAREER PATHWAYS. AND THOSE MIGHT BE SOME OF THE ONES YOU'RE ABOUT TO HEAR ABOUT BUT THESE PROVIDE GOOD FOUNDATIONAL SKILLS FOR PEOPLE UH TO BOTH WORK IN IHSS BUT TO DO OTHER PIECES IN THE HEALTHCARE OTHER ROLES IN THE HEALTHCARE FIELD IF THEY WANT.

33:32 UM THEN WE HAVE THREE SPECIALIZED PATHWAYS THAT ARE LINKED VERY DIRECTLY INTO OUR IHSS PROGRAM THE FIRST IS AROUND COGNITIVE IMPAIRMENTS AND BEHAVIORAL HEALTH AND THAT CAN INCLUDE TRAINING WILL INCLUDE TRAINING COURSES AROUND DEMENTIA AND ALZHEIMER'S DEVELOPMENTAL DISABILITIES INCLUDING AUTISM AND TRAUMATIC BRAIN INJURIES. THE NEXT SPECIALIZED PATHWAY IS COMPLEX PHYSICAL CARE NEEDS THAT WILL INCLUDE CLASSES AROUND MOBILITY THAT COULD BE AMBULATION TRANSFER UM AROUND CARING FOR SOMEONE WHO HAS HAD AMPUTATION OR NEEDS PROSTHETIC CARE UM HOW TO USE A HOYER LIFT UM AND HOW TO MOVE PEOPLE SAFELY AND LIFT PEOPLE SAFELY AND THEN THE LAST SPECIALIZED PATHWAY IS TRANSITION TO HOME AND COMMUNITY BASED LIVING FROM OUT OF HOME CARE OR FROM HOMELESSNESS THAT WILL INCLUDE PATHWAYS I MEAN CLASSES AROUND CARE MANAGEMENT NAVIGATING THE HEALTH CARE SYSTEM AND TRAUMA INFORMED CARE.

34:30 SO OUR INTENTION IS TO MAKE THE TRAININGS AVAILABLE TO ALL PROVIDERS ACROSS CALIFORNIA. AT THIS POINT WE'RE UM PLANNING THAT CLASSES WILL PRIMARILY BE AVAILABLE ONLINE

34:42 UM SOME COULD BE PRE-RECORDED AND SOME COULD BE TAUGHT LIVE. WE PLAN TO MAKE THEM AVAILABLE IN MULTIPLE LANGUAGES AND UM WE REALLY WANT TO FOCUS ON THE CONTENT.

34:54 THAT IS IMPORTANT TO IHSS AND WPCS PROVIDERS AND RECIPIENTS SO WE REALLY WANT THESE TRAINING TO BE FOCUSED AROUND OUR IHSS PROGRAM UH TO THE LARGEST EXTENT POSSIBLE. UM WE WILL HAVE SOME CLASSES THAT ARE IN PERSON AND LIVE AND SOME OF THAT IS JUST FIGURING OUT WHAT'S APPROPRIATE DURING THE PANDEMIC AND WHAT DIFFERENT TRAINING VENDORS HAVE TO OFFER IN DIFFERENT REGIONS SO THAT WE MAKE SURE THAT PEOPLE ARE EQUITABLY ABLE TO RECEIVE THE TRAINING. UM PEOPLE MAY HAVE QUESTIONS ABOUT UM

35:24 WE'VE GOTTEN ASSETS BEFORE. DO YOU HAVE TO PAY FOR THE TRAININGS? NO ALL THE TRAININGS WILL BE FREE AND IN FACT PEOPLE WILL BE COMPENSATED FOR THEIR TIME IN THE TRAINING SO PROVIDERS WHO TAKE TRAINING WILL RECEIVE THEIR HOURLY WAGE FOR THAT TRAINING TIME THEY SPEND. SO FOR EVERY HOUR THEY'LL GET PAID THEIR WAGE

35:41 AND WE'RE ALSO SETTING A SERIES OF INCENTIVE PAYMENTS UM RIGHT NOW WE HAVE THREE INCENTIVE PAYMENTS AVAILABLE UM WE ARE STILL WORKING OUT WHAT THE ACTUAL PAYMENTS AMOUNTS WILL BE SO THE THREE PATHWAYS ARE FIRST IS COMPLETING 15 HOURS OF TRAINING IN ANY PATHWAY AND THERE ISN'T A LIMIT SO IF YOU WANT TO DO ONE PATHWAY IF YOU WANT TO DO MULTIPLE PATHWAYS AND DO 15 HOURS IN EACH OF THOSE YOU CAN GET MULTIPLE INCENTIVE PAYMENTS. THE SECOND INCENTIVE PAYMENT IS BY COMPLETING 15 HOURS IN A SPECIALIZED PATHWAY AND THEN GOING TO WORK FOR A NEW RECIPIENT THAT NEEDS THAT TYPE OF SPECIALIZED CARE AND PROVIDING AT LEAST 40 HOURS OF AUTHORIZED CARE IN THE FIRST MONTH OF SERVICE. SO THAT'S THE SECOND PATHWAY

36:26 AND THE THIRD PATHWAY IS VERY SIMILAR TO THE SECOND UM IT'S JUST THAT YOU'VE DONE THE 15 HOURS IN A SPECIALIZED PATHWAY. YOU GO TO WORK FOR A NEW RECIPIENT THAT NEEDS THAT TYPE OF CARE AND THEN YOU'VE PROVIDED 40 HOURS OF AUTHORIZED CARE PER MONTH FOR AT LEAST SIX MONTHS SO WE'RE HOPING THAT WILL BOTH UM GIVEN THOSE THREE INCENTIVES THAT WILL BOTH INCENTIVIZE PEOPLE TO TAKE THE TRAINING AND STICK WITH IT AND TO REALLY PURSUE A PATHWAY THAT IT WILL ENCOURAGE NEW PROVIDERS TO ENTER OUR SYSTEM THAT IT WILL FINANCIALLY REIMBURSE PEOPLE FOR THEIR TIME AND ENERGY IN MOVING FORWARD AND THAT IT

WILL INCENTIVIZE PEOPLE TAKING ON UM TAKING JOBS WITH RECIPIENTS WHO MIGHT NEED THAT MORE SPECIALIZED CARE AND THEN STAYING WITH THAT RECIPIENT OVER TIME. SO WE'RE REALLY HOPING IT WILL BOTH BE A RECRUITMENT TOOL BUT ALSO A SIGNIFICANT RETENTION TOOL. UM CURRENTLY WE ARE IN THE PROCESS OF BUILDING THIS PROGRAM.

37:21 SO UM WE ANTICIPATE THAT CLASSES WILL BEGIN UM IN THE FALL OF 2022. LIKELY UM LATE SEPTEMBER EARLY OCTOBER UM WE INTEND TO HAVE LIKE A MENU OF CLASSES AND COURSES WILL BE AVAILABLE ONLINE UM AND WE WILL HAVE ALL THE PROCESSES SET UP AT THAT TIME AROUND HOW DO YOU UH WHAT HAPPENED? HOW DO YOU SIGN UP FOR A CLASS? HOW DO YOU VERIFY THAT YOU'VE COMPLETED THE CLASS?

37:52 AND WE WILL HAVE MULTIPLE VENDORS OFFER VENDORS TO COME AND PROVIDE THOSE CLASSES SO WE'RE REALLY EXCITED TO BE OFFERING THIS PROGRAM UM BUT WE KNOW THERE WILL BE MORE QUESTIONS AS WE ARE CONTINUING TO WORK AND HAVE STAKEHOLDER CONVERSATIONS ONGOING THROUGHOUT THIS PROCESS AND I KNOW THERE MAY BE QUESTIONS. I'M NOT TAKING MORE THAN MY ALLOTMENT OF TIME BUT I WILL DO MY BEST TO ANSWER ANY QUESTIONS IN THE CHAT OR TO FOLLOW UP WITH PEOPLE AFTERWARDS IF THERE'S ADDITIONAL QUESTIONS THANK YOU AND WITH THAT I'D LIKE TO TURN IT OVER TO LISA LOWRY TO TALK ABOUT CNAS.

38:32 SORRY ABOUT THAT I HAD MY MUTE ON. I'M LISA LOWRY I WORK FOR THE DEPARTMENT OF HEALTHCARE ACCESS AND INFORMATION IN THE HEALTHCARE WORKFORCE DEVELOPMENT DIVISION AND I'M ACTUALLY THE PROJECT MANAGER FOR THIS VERY EXCITING CNA AND HCBS BUILD OUT.

38:51 HCAI HAS TWO RELATED INITIATIVES TO INCREASE THE CLINICAL WORKFORCE FOR CNA AND HCBS AND HCBS IS INCLUSIVE OF CNA HHA LVN AND RNS

39:04 WE INTEND TO DO THIS BY DEVELOPING AND EXPANDING PROGRAMS TO INCREASE RACIAL AND LANGUAGE DIVERSITY EXPAND ACCESS TO HEALTH CARE SERVICES IN RURAL COMMUNITIES FOR MEDICAL PATIENTS CHILDREN WITH COMPLEX MEDICAL CONDITIONS INDIVIDUALS WITH DISABILITIES AND GERIATRIC CARE FOR AGING ADULTS. WE CONTRACTED WITH FRIEDEN ASSOCIATES TO CONDUCT A NEEDS ASSESSMENT AND LANDSCAPE ANALYSIS AND TO INFORM US ON AREAS OF OPPORTUNITY WHERE HPI CAN INVEST IN PROGRAMS OR INITIATIVES TO INCREASE THIS VITAL WORKFORCE.

39:40 WE HAVE COMPLETED ALMOST 100 PERCENT OF OUR TARGETED STAKEHOLDER PARTNER INTERVIEWS AND DISCUSSIONS. DURING DECEMBER AND JANUARY WE GATHERED FEEDBACK WE'VE IDENTIFIED POTENTIAL OPPORTUNITIES AND BARRIERS AND WE ARE COLLECTING ADDITIONAL DATA CONCURRENTLY. OUR CONSULTANT HAS DEVELOPED AND IS REFINING A SERIES OF LANDSCAPE ANALYSES USING DATA BACKED RESEARCH TO VALIDATE THE INTERVIEW FINDINGS. HCAI HAS ALSO CONTRACTED WITH EMPOWERED AGING FOR THE ADMINISTRATION AND EXPANSION OF THE HEALTH CAREER PATHWAY PROGRAM.

40:20 WORK IS CURRENTLY UNDERWAY TO SELECT THE EXPANSION SITES. GRANTS FOR THESE SITES ARE CONTINGENT ON APPLICATIONS THAT INCLUDE LOCAL PARTNERSHIP FOR OVERSEEING THE PROGRAM INCLUDING LOCAL ADULT EDUCATION WORKFORCE DEVELOPMENT AT SKILLED NURSING FACILITIES. ADVOCATES FOR RESIDENTS OF LONG-TERM CARE AND SITES WILL BE REQUIRED TO USE A CURRICULUM PROVIDED BY THE HEALTH CAREER PATHWAY PROGRAM. ONE THAT IS APPROVED BY CDPH AND WILL SEEK TO CREATE APPROPRIATE AND COMPREHENSIVE SUPPORT SERVICES FOR STUDENTS WITH ADDRESSABLE BARRIERS SUCH AS TRANSPORTATION FOOD AND SOFT SKILLS TRAINING

41:02 THE INITIAL PROGRESS REPORT IS EXPECTED AT THE END OF AUGUST OF THIS YEAR

41:08 RECENTLY OUR CONSULTANT PREPARED A AND PRESENTED A COMPREHENSIVE LIST OF RECOMMENDATIONS THAT HCAI IS REVIEWING

41:17 IN THE NEXT MONTH THEY WILL CONTINUE TO ENGAGE STAKEHOLDERS IN ACTIVITIES THAT DIVE DEEPER INTO THESE OPPORTUNITIES TO ASSIST WITH PRIORITIZING PROGRAMS AND INITIATIVES IN SUPPORT OF OUR GOAL TO INCREASE THE CNA AND HCBS CLINICAL WORKFORCE. WE ARE AWARE OF THE SIGNIFICANT WORKFORCE CHALLENGES THAT THESE CLASSIFICATIONS HAVE AND ARE LOOKING FOR APPROPRIATE APPROACHES TO ADOPT QUICKLY WHERE WE CAN ALSO PROCEED VERY VERY THOUGHTFULLY ONCE HCAI HAS THE OPPORTUNITY UM AND APPROVES THE PRIORITIZED PROGRAMS AND INITIATIVES. WE WILL MAP AND PLAN ACTIVITIES TO IMPLEMENT AND OPERATIONALIZE THESE. CONCURRENTLY WE WILL WORK COLLECTIVELY WITH OUR STAKEHOLDERS AND PARTNERS TO INFORM ON PROGRAM OR INITIATIVE PROGRAMS AND ADDRESS BARRIERS THAT MAY IMPACT EFFECTIVE IMPLEMENTATION.

42:17 I HAVEN'T HAD A CHANCE TO LOOK AT THE Q AND A BUT I'M HAPPY TO RESPOND IN THAT FORUM AND WITH THAT I WILL TURN IT OVER TO THE NEXT PRESENTER. THANKS SO MUCH AND THAT WOULD BE LISA. THANK YOU SO MUCH.

42:30 UM AND AND SO ALSO FOR CERTIFIED NURSING ASSISTANTS THE LEGISLATURE IN THE APPROVAL OF THE 2122 BUDGET UM APPROVED 14 AND A HALF MILLION DOLLARS THAT WOULD GO UM TO THROUGH THE LABOR AGENCY TO THE CALIFORNIA WORKFORCE DEVELOPMENT BOARD AS PART OF THE STATE BOARD'S HIGH ROAD TRAINING PARTNERSHIPS TO SUPPORT EARN AND LEARN STRATEGIES INNOVATIVE APPRENTICESHIPS IN CERTIFIED NURSING ASSISTANTS TRAINING AND THE HIGH ROAD TRAINING PARTNERSHIPS ARE A VERY DISTINCTIVE INNOVATIVE SET OF PROGRAMS LED BY OUR WORKFORCE DEVELOPMENT BOARD THAT ARE BASED ON INDUSTRY SECTOR PARTNERSHIPS STARTING WITH THE JOBS STARTING WITH GOOD JOBS FOCUSING ON JOB QUALITY AND WORKER VOICE

43:28 UM THIS 14 AND A HALF MILLION WILL SOON GO OUT IN SOLICITATION FOR FOUR YEARS OF TRAINING WITH THE PRIMARY GOALS OF EXPANDING APPRENTICESHIP IN LONG-TERM CARE AND IN NURSING HOME SETTINGS AND IN DEVELOPING A NEW PATHWAY A NEW APPRENTICESHIP PATHWAY TO GO FROM CERTIFIED NURSING ASSISTANT TO LICENSED VOCATIONAL NURSE. AND AS MANY OF YOU MAY KNOW EXPANDING APPRENTICESHIPS IS A PRIMARY GOAL OF OUR GOVERNORS WITH THE GOAL OF GETTING TO 500 000 APPRENTICES BY THE YEAR 2029. WE ARE WELL ON OUR WAY TOWARDS MEETING THAT GOAL

44:12 AND THOSE OF US WHO LIVE AND BREATHE WORKFORCE KNOW THAT APPRENTICESHIPS REALLY ARE THE GOLD STANDARD THAT ENABLE PEOPLE TO EARN WHILE THEY LEARN. THESE PROGRAMS WILL CENTER AROUND THIS EARN AND LEARN MODEL AND BE PART OF INNOVATIVE EFFORTS TO EXPAND THE USE OF APPRENTICESHIP MODELS IN HEALTHCARE. THESE PROGRAMS WILL ALSO PROVIDE THE MUCH-NEEDED WRAP AROUND SUPPORTS FOR SUCCESS THAT CAN RANGE FROM EVERYTHING FROM HELP WITH HOUSING HELP WITH CHILD CARE HELP WITH CLASSES

44:50 ANY REMEDIAL EDUCATION THAT PEOPLE MIGHT NEED TO BE SUCCESSFUL IN CLASSES AND I THINK MOST IMPORTANTLY WILL LINK INCREASED IN SKILLS INCREASED IN CERTIFICATION TO WAGE INCREASES AND SO WORKERS WILL RECEIVE WAGE INCREASES AFTER PASSING STATE EXAMS AND

WHAT WE HOPE TO LEARN THROUGH THESE PROJECTS IS AGAIN HOW TO TEST AND HOW TO EXPAND THE USE OF APPRENTICESHIP IN LONG-TERM CARE

45:23 AND WHAT THE IMPACT OF INCREASED WORKER SKILL AND WAGES MAY HAVE ON THE OUTCOMES OF THE RECIPIENTS OF THESE SERVICES. UM AND LET ME WITH THAT BRIEF DESCRIPTION NOW PASS IT ON TO KATHERINE KNIGHT FROM THE DEPARTMENT OF DEVELOPMENTAL SERVICES

45:45 HELLO AND GOOD MORNING AND THANK YOU I'M KATHRYN KNIGHT ASSISTANT DEPUTY DIRECTOR WITH THE DEPARTMENT OF DEVELOPMENTAL SERVICES AND ONE OF TWO PROJECT LEAVES FOR THE TWO INITIATIVES THAT I'LL TALK ABOUT TODAY.

45:56 DRUG SUPPORT PROFESSIONALS ARE CRITICAL TO THE PROVISION OF SERVICES AND SUPPORTS FUNDED THROUGH CALIFORNIA'S REGIONAL CENTERS TO INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES. IN RECOGNITION OF THE VALUE OF SERVICES PROVIDED BY DSPS THE DEPARTMENT AIMS TO DEVELOP A CAREER PATH WHICH DOES NOT CURRENTLY EXIST TODAY. THIS ADDITIONAL TRAINING AND DEVELOPMENT WILL ENHANCE THE SERVICES DSPS PROVIDE AND FOSTER A MORE SUBSTANTIAL WORKFORCE.

46:27 DURING THIS FISCAL YEAR THERE ARE 7.9 MILLION DOLLARS COMBINED FOR BOTH DSP WORKFORCE TRAINING AND DEVELOPMENT AND BILINGUAL DIFFERENTIAL WITH A LITTLE MORE THAN HALF OF THAT FIGURE AT 4.3 MILLION DEDICATED TO DSP WORKFORCE DEVELOPMENT.

46:40 DURING THE SECOND YEAR OF THE IMPLEMENTATION IN FISCAL YEAR 2223 THERE'S A TOTAL OF 23.4 MILLION DOLLARS

46:47 WITH 16.2 MILLION DEDICATED TO DSP WORKFORCE IMPLEMENTATION AND 7.2 MILLION IN FUNDING FOR BILINGUAL DIFFERENTIAL. BEGINNING IN FISCAL YEAR 23 24 THERE WILL BE 85.8 MILLION IN ONGOING FUNDING WITH 75 MILLION FOR DSP WORKFORCE AND 10.8 MILLION FOR BILINGUAL DIFFERENTIAL. BOTH OF THESE INITIATIVES ARE VOLUNTARY FOR DIRECT SUPPORT PROFESSIONALS AND WILL NOT BE REQUIRED WITH REGARD TO THE DSP WORKFORCE TRAINING AND DEVELOPMENT. WE ARE IN THE VERY EARLY STAGES AND OUR TEAM HAS CONDUCTED LOTS OF RESEARCH OF NATIONAL ASSOCIATIONS AND OTHER STATES AND HAVE MET WITH A FEW TO DISCUSS TIPS AND LESSONS LEARNED THAT CALIFORNIA SHOULD CONSIDER FOR IMPLEMENTATION. WE'VE NOT SETTLED ON A NAME YET BUT YOU MIGHT HEAR IT REFERRED TO AS DSP ACADEMY

47:37 OR DSP UNIVERSITY THE DSP ACADEMY WILL BE COMPETENCY BASED AND DDS IS CURRENTLY DEVELOPING CORE COMPETENCY AREAS WHICH WILL INCLUDE SKILL SETS. DIRECT SUPPORT PROFESSIONALS WILL BE EXPECTED TO DEMONSTRATE ONCE TRAINING IS COMPLETE. THE DSP ACADEMY WILL PROVIDE TIERED TRAINING AND CERTIFICATION WITH THREE TIERS THAT ADDRESS COMPETENCY AREAS AND WILL INCLUDE A CONTINUING EDUCATION COMPONENT A P DIFFERENTIAL OF APPROXIMATELY ONE TO TWO DOLLARS WILL BE TIED TO ADVANCEMENT THROUGH AND COMPLETION OF THE TRAINING REQUIRED FOR EACH TIER

48:15 DDS IS CURRENTLY WORKING ON DEVELOPING A STAKEHOLDER ENGAGEMENT WORK GROUP AND WE ANTICIPATE MEETING WITH THIS GROUP SEVERAL TIMES OVER THE NEXT FEW MONTHS. AREAS OF ENGAGEMENT FOR THIS WORK GROUP

48:26 INCLUDE DETERMINING COMPETENCY AREAS AND THE METHOD BY WHICH TRAINING WILL BE AVAILABLE

48:32 THE PAY DIFFERENTIAL TIED TO EACH TIER AND THE METHOD FOR PAYMENT AS WELL AS OUTCOME MEASURES WITH RESPECT TO THE BILINGUAL DIFFERENTIAL THE PROVISION OF SERVICES THAT ARE CULTURALLY AND LINGUISTICALLY RESPONSIVE TO CONSUMERS IS INSTRUMENTAL IN IMPROVING ACCESS AND EQUITY IN THE DEVELOPMENTAL SERVICE SYSTEM

48:52 THE PROVISION OF A PAID DIFFERENTIAL FOR BILINGUAL AND MULTILINGUAL DSPS WILL INCREASE CONSUMER ACCESS TO STAFF WHO SPEAK THEIR PREFERRED LANGUAGE. WE ARE IN THE EARLY STAGES OF DEVELOPING A SYSTEM FOR PROVIDING A PAY DIFFERENTIAL TO DIRECT SUPPORT PROFESSIONALS WHO CAN COMMUNICATE IN A LANGUAGE OR MEDIUM OTHER THAN ENGLISH AS

49:11 A PART OF THEIR REGULAR JOB DUTIES DSPS WILL BE ELIGIBLE FOR BILINGUAL DIFFERENTIAL OR MULTILINGUAL DIFFERENTIAL IF BOTH OF THE FOLLOWING CONDITIONS ARE MET

49:23 ONE IS THAT DUTIES THAT ARE CURRENTLY ASSIGNED TO THE DSP REQUIRE COMMUNICATION AND A LANGUAGE OR MEDIUM OTHER THAN ENGLISH WITH AN INDIVIDUAL WHO HAS A DEVELOPMENTAL DISABILITY AND WHEN APPROPRIATE THEIR FAMILIES

49:36 THE SECOND IS THAT DSPS WILL BE REQUIRED TO PASS AN EXAMINATION CERTIFYING THEIR ABILITY TO COMMUNICATE IN THEIR LANGUAGE OR MEDIUM OTHER THAN ENGLISH

49:47 OUR TEAM IS CURRENTLY RESEARCHING CONTRACTORS AND EXCUSE ME CONTRACTORS PROVIDING BILINGUAL CERTIFICATION ACROSS THE STATE AND WE WILL ALSO BE ENGAGING STAKEHOLDERS FOR INPUT AND CONSIDERATIONS FOR IMPLEMENTATION OF THIS INITIATIVE. AS WELL DDS WILL DEVELOP A CERTIFICATION PROCESS AND A DIFFERENTIAL OR STIPEND OF APPROXIMATELY 100 TO 200 DOLLARS PER MONTH WILL BE PROVIDED TO DSPS WHO ARE CERTIFIED. WITH THAT I WILL NOW TURN IT OVER TO MY COLLEAGUES WITH THE DEPARTMENT OF HEALTHCARE SERVICES

50:19 HI GOOD MORNING THIS IS ANASTASIA DODSON FROM THE DEPARTMENT OF HEALTH CARE SERVICES AND I'M HERE ALSO WITH MY COLLEAGUE JOSEPH BILLINGSLEY

50:32 UM WE ARE GOING TO TALK ABOUT PATH BUT I WANT TO FLAG THAT WE'VE GOT OTHER COMPONENTS THROUGHOUT SOME OF THOSE OTHER AREAS THAT WERE THAT ARE SUPPORTED IN PARTNERSHIP WITH DHCS

50:44 ON ON PATH UM YOU MAY HAVE HEARD A LITTLE BIT ABOUT THIS ALREADY IT IS PART OF OUR CAL AIM MULTI-YEAR INITIATIVE THAT WAS RECENTLY AUTHORIZED THROUGH OUR 1115 AND 1915B WAIVER PROGRAMS AUTHORIZED BY THE CMS CENTERS FOR MEDICARE AND MEDICAID SERVICES SO THE FUNDING UM FOR PATH IS IN THE HCBS SPENDING PLAN AGAIN ANOTHER ACRONYM BUT IN THAT SPENDING PLAN THERE'S 100 MILLION TOTAL FUNDS FOR PATH

51:20 WHICH WILL SUPPORT A MULTI-YEAR EFFORT TO ADVANCE THE COORDINATION AND DELIVERY OF QUALITY CARE AND SERVICES TO HELP EXPAND THE HOMELESS SYSTEM OF CARE AND OUR INTENT IS TO CREATE OVER 2000 DIRECT SERVICE JOBS FOR THOSE PROVIDING SERVICES TO HOMELESS AND FORMERLY HOMELESS INDIVIDUALS THROUGH INVESTMENTS IN DEPARTMENT OF SOCIAL SERVICES

PROGRAMS UM AND THEN AS PART OF CAL AIM AND IN WITH PATH WE WILL NEED TO UM SUPPORT LOCAL

51:54 GOVERNMENTS AND COMMUNITY-BASED ORGANIZATIONS THAT ARE GOING TO RECRUIT ON BOARD AND TRAIN A NEW WORKFORCE. IN PARTICULAR THERE IS A NEED FOR A WORKFORCE WITH EXPERIENCE AND EXPERTISE IN WORKING WITH PEOPLE WITH DISABILITIES

52:09 AND OLDER CALIFORNIANS. THE FUNDING IS GOING TO SUPPORT OUTREACH EFFORTS TO PUBLICIZE JOB OPPORTUNITIES WORKFORCE DEVELOPMENT STRATEGIES TO TRAIN STAFF AND EVIDENCE-BASED PRACTICES IMPLEMENT INFORMATION TECHNOLOGY FOR DATA SHARING AND SUPPORT, TRAINING STIPENDS. THIS PATH FUNDS IS ALSO GOING TO SUPPORT OUR ENHANCED CARE MANAGEMENT AND COMMUNITY SUPPORTS PROVIDER CAPACITY BUILDING.

52:35 SO WORKFLOW DEVELOPMENT OPERATIONAL REQUIREMENTS AND OVERSIGHT AS WELL AS ELECTRONIC HEALTH RECORDS TECHNOLOGY AND CARE MANAGEMENT SYSTEMS AND REFERRAL SYSTEMS

52:46 SO THERE'S A LOT GOING ON IN CALAIM AND IN OUR HCBS SPENDING PLAN SPENDING PLAN AND PATH IS AN IMPORTANT COMPONENT HERE

52:59 ALL RIGHT AND WITH THAT I'LL HAND IT OFF TO THE NEXT SPEAKER THANKS ANASTASIA AND EVERYBODY ELSE FOR UM HAVING ME HERE TODAY UM I WANT TO PROVIDE A ADDITIONAL UPDATE ON ANOTHER OF OUR HOME COMMUNITY-BASED SPENDING PLAN UM INITIATIVES UM AND THIS ONE WAS REFERRED TO PREVIOUSLY UM BY UH SUSAN UM THE DEPARTMENT OF AGING UM AND IT ALSO ALIGNS WITH ONE OF THE DEPARTMENT OF SOCIAL SERVICES INITIATIVES SO THIS IS THE NON-IHSS HCBS CARE ECONOMY PAYMENTS INITIATIVE

53:31 UM AND SO THIS FUNDING UM IS REALLY MEANT TO ALIGN UM WITH THE SIMILAR FUNDING THAT CLAIRE SPOKE TO UM FOR THE IHSS POPULATION UM

53:45 AND SO THIS FUNDING IS FOR THE NON-IHSS POPULATION RECOGNIZING THE VARIOUS DIRECT CARE SERVICE WORKERS THAT PROVIDE SERVICES FOR UM INDIVIDUALS THROUGH MULTIPLE OTHER HOME AND COMMUNITY BASED SERVICES AUTHORITIES THAT WE THAT WE OPERATE

54:04 AND SO AGAIN THE GOAL FOR THIS INITIATIVE WHICH IS FUNDED THROUGH 12 UM 12 AND A HALF MILLION DOLLARS IN IN ONE-TIME FUNDING

54:14 IS TO UH PROVIDE A ONE-TIME INCENTIVE PAYMENT OF 500 TO EACH CURRENT DIRECT CARE NON-IN-HOME SUPPORTIVE SERVICES PROVIDER OF MEDI-CAL HOME AND COMMUNITY-BASED SERVICES THAT PROVIDED SERVICES DURING THE PANDEMIC PERIOD SPECIFICALLY PROVIDING SERVICES FOR AT LEAST TWO MONTHS BETWEEN MARCH OF 2020 AND MARCH OF 2021

54:40 AND SO THIS IS MEANT TO ADDRESS PERSONAL CARE SERVICES WORKERS HOMEMAKER SERVICES AND ADDITIONALLY WE'RE EXPECTING THAT THIS PROPOSAL WILL LOOK AT INCENTIVIZING RETENTION AND CONTINUING ACCESS FOR CURRENT PROVIDERS RECOGNIZING SERVICES THAT THEY PROVIDED DURING THIS PERIOD

55:11 AND WE WE ESTIMATE THAT IT IT COULD IMPACT UM UP TO 25 000 DIRECT CARE HCBS SERVICE WORKERS SERVING A VARIETY OF OUR DIFFERENT PROGRAMS. LOOKING AT THE MULTI-PURPOSE SENIOR SERVICES PROGRAM WAIVER OUR COMMUNITY-BASED ADULT SERVICES PROGRAM OUR HOME AND COMMUNITY-BASED ALTERNATIVES WAIVER UM THE THE PROGRAM OF ALL INCLUSIVE CARE FOR THE ELDERLY OR PACE AND YOU KNOW OTHER PROGRAMS

55:38 SO UM AGAIN UM THIS UH THIS INITIATIVE FOCUSES ON RETENTION UM RECOGNITION AND WORKFORCE DEVELOPMENT UM AND UM WITH A GOAL OF ALLEVIATING FINANCIAL STRAIN UM IN HARDSHIPS SUFFERED BY CALIFORNIA'S HDBS DIRECT CARE WORKFORCE UM WHICH WERE EXACTLY EXACT EXASPERATED DURING THE 2019 PUBLIC HEALTH EMERGENCY. UH ADDITIONALLY I WANT TO ALSO FLAG A COUPLE OF OTHER UPDATES UM IN RELATION TO OUR HOME COMMUNITY BASED ALTERNATIVES WAIVER

56:11 UM THE DEPARTMENT HAS ALSO UM RECENTLY AS OF JANUARY 1 UM INCREASED THE UM THE RATE FOR OUR PERSONAL CARE AGENCIES UM THROUGH WITH WHICH PROVIDE PERSONAL CARE SERVICES TO MANY OF OUR HCBS POPULATION

56:34 AND SO RECOGNIZING INCREASE IN MINIMUM WAGE THE DEPARTMENT HAS RAISED THAT RATE SPECIFICALLY FROM WHERE IT WAS PREVIOUSLY SET AT 14.48 CENTS PER HOUR

56:51 IT IS NOW SET TO 18.76 PER HOUR SO THAT IS A RECENT INCREASE THAT WAS PUT IN PLACE SPECIFICALLY FOR UM SERVICES PROVIDED THROUGH PERSONAL CARE AGENCIES UM ADDITIONALLY I'M JUST FLAGGING THAT WHILE THESE A COUPLE OTHER UM QUICK UPDATES THAT DON'T ACTUALLY DIRECTLY UM CREATE NEW JOBS THAT ARE ALIGNING WITH THE WORK WE'RE TALKING ABOUT HERE IN

57:23 TERMS OF OF WORKING TO BUILD AND IMPROVE OUR DIRECT SERVICE WORKFORCE UM [MUSIC] WE ARE ALSO THROUGH THE UM HOME THE UH CALIFORNIA'S HOME HUMAN BASED SERVICES SPENDING PLAN AS WELL AS WAIVER RENEWALS WITHIN OUR HCBS PROGRAMS WE ARE CONTINUING TO WORK TO EXPAND ACCESS TO OUR WAIVER PROGRAMS SPECIFICALLY THROUGH THE ASSISTED LIVING WAIVER WEIGHTLESS ELIMINATION INITIATIVE THROUGH WHICH WE RECENTLY RECEIVED CMS OUR CENTERS FOR MEDICARE MEDICAID SERVICES APPROVAL TO ADD 7 000 ADDITIONAL SLOTS

58:08 TO THAT WAIVER THEREFORE LOOKING TO EXPAND ACCESS TO THAT WAIVER WHICH ALSO REQUIRE CORRESPONDING WORKFORCE AND JOBS TO ACCOMMODATE THAT EXPANDED ACCESS AND THEN ALSO FOR OUR HOME AND COMMUNITY-BASED ALTERNATIVES WAIVER

58:27 WHICH WE ARE CURRENTLY IN THE PROCESS OF RENEWING WITH CMS FOR A NEW FIVE-YEAR TERM THAT WOULD BE EFFECTIVE JANUARY ONE OF THIS YEAR THROUGH DECEMBER OF 2026

58:39 OVER THE COURSE OF THAT WAIVER WE'RE ALSO EXPANDING THAT WAIVER BY 3,402 ADDITIONAL SLOTS AGAIN EXPANDING ACCESS TO THE WAIVER AND ALSO REQUIRING INCREASED ACCESS TO SERVICE PROVIDERS TO ACCOMMODATE THAT THAT EXPANSION SO I THINK THOSE ARE KEY POINTS THAT WE WANTED TO HIGHLIGHT UM AND DEFINITELY AGAIN APPRECIATE THE OPPORTUNITY TO SHARE TODAY AND LOOK FORWARD TO ANY QUESTIONS THAT WE HAVE AND NOW I'LL HAND BACK UM TO SUSAN THANK YOU SO MUCH

59:15 THANK YOU JOSEPH AND TO ALL OF OUR PANELISTS THANK YOU VERY MUCH AND MANY OF OUR PANELISTS HAVE BEEN ANSWERING QUESTIONS IN THE Q AND A FEATURE. WE WILL GO BACK TO THOSE BUT WE HAVE A FEW THAT ARE UNANSWERED AND I WOULD INVITE ALL PARTICIPANTS IF YOU HAVE ANY QUESTIONS OR COMMENTS ABOUT WHAT HAS BEEN SHARED THUS FAR TO ENTER IN THE Q AND A FEATURE PLEASE JUST ENTER YOUR QUESTION.

59:45 THE FIRST UNANSWERED QUESTION THAT WE HAVE: GREAT PRESENTATION WOULD BE HELPFUL TO HEAR WHAT THE OPPORTUNITIES ARE FOR PEOPLE WHO HAVE CRIMINAL RECORDS AND I THINK THAT WILL TOUCH ON ON SEVERAL OF THE DEPARTMENTS. ANYONE WANT TO JUMP IN AND START THAT REPLY?

1:00:08 I CAN START. SUSAN SURE GO AHEAD. THANK YOU, DARCI. YEAH, NO PROBLEM UM SO JUST WHILE UH THE OTHER PANELISTS ARE KIND OF THINKING ABOUT THIS QUESTION, I THINK IT'S A GREAT QUESTION UM IF WE TAKE A STEP BACK UH FOR A MOMENT AND THINK ABOUT HOW PEOPLE OF COLOR ESPECIALLY UH BLACK AND BROWN INDIVIDUALS ARE HISTORICALLY OVERREPRESENTED IN OUR CRIMINAL JUSTICE SYSTEM, WE KNOW THAT THERE ARE JUST FACTORS OF INSTITUTIONAL RACISM THAT HAVE REALLY UH

1:00:44 LIMITED OR JUST RESULTED IN THE OVER-REPRESENTATION OF PEOPLE OF COLOR IN OUR CRIMINAL JUSTICE SYSTEM AND THEN CONTINUES WHEN WE START TO TALK ABOUT WORKFORCE ISSUES RIGHT BECAUSE THAT THAT BACKGROUND OF CRIMINAL JUSTICE HISTORY THEN LIMITS FOLKS AND THEIR ABILITY TO UH APPLY FOR CERTAIN POSITIONS AND GET CERTIFICATION IN UH CERTAIN POSITIONS AND SO I WILL SAY BROADLY SPEAKING THAT

1:01:10 FROM AN EQUITY PERSPECTIVE IT IS IMPERATIVE THAT WE TACKLE THIS ISSUE AND REALLY TRY TO HELP UH INDIVIDUALS WHO HAVE A BACKGROUND IN CRIMINAL JUSTICE

1:01:22 OR HAVE A CRIMINAL JUSTICE UH PIECE IN THEIR BACKGROUND UM TO HELP CONNECT THEM TO THE WORKFORCE IN A WAY THAT ALLOWS THEM TO TAKE ADVANTAGE OF A LOT OF THE DIFFERENT PROGRAMS AND PIECES THAT WE'RE TALKING ABOUT SO UM JUST UH KIND OF BROADLY SPEAKING WE RECOGNIZE THAT AS AN IMPORTANT ASPECT OF IMPROVING THE EQUITY AND DIVERSITY IN OUR WORKFORCE AND SO I'LL JUST UH MAYBE OPEN IT UP TO OTHER PANELISTS WHO CAN SPEAK TO UM MAYBE THE CRIMINAL JUSTICE PIECE BUT BUT MORE BROADLY HOW A LOT OF OUR EFFORTS ARE REALLY TRYING TO TARGET UM PEOPLE OF COLOR AND THOSE WHO HAVE BEEN HISTORICALLY UNDERREPRESENTED IN IN OUR WORKFORCE.

1:02:06 YOU KNOW I CAN JUMP IN DARCI AND AND REALLY UM I THINK ECHO WHAT YOU'RE SAYING AND UM NOT ONLY IS IT IMPORTANT TO ADDRESS THE INEQUITIES IN THE WORKFORCE IT IS REALLY IMPORTANT TO UM INCLUDE PEOPLE WITH LIVED EXPERIENCE IN THE DELIVERY OF ALL KINDS OF HEALTH AND AND SOCIAL SERVICES IN THE BUDGET PROPOSALS FOR NEXT YEAR'S BUDGET IN THE BUILDING A HEALTHY WORKFORCE FOR CALIFORNIA. A SET OF PROPOSALS.

1:02:43 THERE IS A PROPOSAL WE'RE REALLY EXCITED ABOUT WHICH WOULD TAKE THE EMERGENCY MEDICAL TECHNICIAN TRAINING THAT HAS BEEN SO SUCCESSFUL IN ALAMEDA COUNTY IN RECRUITING UM YOUNG ADULTS WITH CRIMINAL JUSTICE WITH UM JUSTICE INVOLVED BACKGROUNDS AND UM TRAINING WITH TRAINING THEM TO WORK IN EMERGENCY TECHNICIAN JOBS AS AN ENTRY POINT INTO HEALTH CARE UM SO THAT IS A PROGRAM THAT HAS FIGURED OUT HOW TO DO RECORDS EXPUNGE EXPUNGEMENT AND REALLY UM WORK WITH YOUNG PEOPLE WHO HAVE HAD

1:03:20 EXPERIENCES WITH THE JUVENILE JUSTICE AND THE ADULT JUSTICE SYSTEM WE ARE ALSO IN BUILDING THIS INITIATIVE LOOKING FORWARD TO THE PARTICIPATION OF THE DEPARTMENT OF CONSUMER AFFAIRS IN BCSH TO REALLY LOOK AT AT OUR REGULATORY LEVEL WHAT COULD BE DONE TO REALLY INCREASE OPPORTUNITIES FOR PEOPLE WITH EXPERIENCE IN THE UM IN THE JUSTICE SYSTEM SO A HUGE ISSUE AND THANKS FOR FLAGGING THAT, CARLA

1:03:49 THANK YOU BOTH WE'LL GO AHEAD AND MOVE TO THE NEXT QUESTION AND COME BACK TO OTHER THOUGHTS ON THAT IF IF TIME ALLOWS. ARE THE EFFORTS TO RAISE THE WAGE FLOOR IN CBAS COMMUNITY BASED ADULT SERVICES PROGRAMS AND NURSING HOME SETTINGS GOING TO BE FUNNELED THROUGH THE MEDI-CAL MANAGED CARE PLANS?

1:04:07 THE PAYERS OF CBAS LTC SNF SERVICES UM SO I CAN START ON THIS YOU KNOW FOR THE MOST PART UM THESE INITIATIVES SUPPORT UM INCENTIVES STIPENDS PAID DIFFERENTIALS RETENTION BONUSES. BUT PERHAPS DHCS COULD SPEAK TO WAGE FLOORS UM AND RESPOND TO THIS QUESTION? YES JOSEPH DO YOU WANT TO START?

1:04:40 SURE I I CAN I CAN TAKE A A QUICK STAB AT IT UM UM ANASTASIA AND IF YOU HAD ANYTHING TO ADD ON UM I WILL PREFACE THAT UM IN TERMS OF HOW THINGS IMPACT CBAS RATES UM DEFINITELY THAT IS SOMETHING THAT YOU KNOW WOULD NEED TO DISCUSS MORE WITH OUR OUR RATE-SETTING COLLEAGUES BUT I THINK

1:05:07 REALLY IT DEPENDS ON WHAT UM WHAT ARE THE INITIATIVES? AND WHAT ARE THE UM THE INTENDED IMPACTS OF THE INITIATIVES?

1:05:14 UM IF IT IS SOMETHING THAT IS UM PROVIDING UM OPPORTUNITIES UM TRAINING OPPORTUNITIES ETC FOR UM SPECIFICALLY FOR WORKERS UM THEN HOW THAT FUNDING IS ACCESSED WILL BE DIFFERENT THAN IF IT IS SOMETHING THAT UM IS LOOKING AT UM ACTUALLY RAISING UM WAGES OR CAPITATION THAT IS PROVIDED TO OUR YEAH THAT IS PROVIDED TO MANAGED CARE PLANS FOR THE PURPOSE OF PROVIDING THAT SERVICE OR THAT BENEFIT UM AND SO UM THEN THERE'S YOU KNOW VARIATIONS

1:05:55 BETWEEN HOW THE DEPARTMENT INCREASES UH OR APPLIES THOSE UM INCREASES TO THE RATE SETTING CALCULATIONS UM AND THEN HOW THAT CARRIES OVER TO ACTUAL NEGOTIATED AGREEMENTS BETWEEN UH MANAGED CARE PLANS AND UM THE CBAS PROVIDERS AND THEN ANASTASIA DO YOU WANT TO ADD ANYTHING?

1:06:19 UM JUST THAT FOR SO IN NURSING HOMES THERE'S A UM VERY UM COLLABORATIVE UM ONGOING DISCUSSION UM ABOUT HOW UM NURSING HOME AND UM QUALITY ASSURANCE FUNDS UM WILL BE MADE GOING FORWARD AND THERE'S ALSO A PROCESS WE'RE WORKING ON WITH STAKEHOLDERS FOR THE LONG-TERM CARE CARVING IN RIGHT NOW. IN ABOUT HALF OF THE COUNTIES IN CALIFORNIA NURSING HOME CARE LONG-TERM CARE IS CARVED INTO MEDI-CAL MANAGED CARE AND THE OTHER HALF IT'S NOT YET BUT

1:06:50 WE ARE WORKING ON THE PROCESS TO CARVE IT IN IN THE REMAINING COUNTIES BY JANUARY 1ST OF 2023. SO YOU KNOW WHEELS ARE IN MOTION BUT UM FOR 2022 AND HALF THE COUNTY'S NURSING HOME PAYMENTS THEY GO THROUGH MANAGED CARE PLANS THANK YOU

1:07:10 I SEE A BROAD QUESTION FOR ALL THE DEPARTMENTS. OOPS WHERE DID IT GO? JOANNE SPETZ HAD A GOOD QUESTION. WILL THERE BE FORMAL EVALUATION OF THE RESULTS OF THESE PROGRAMS AND IF SO WILL THERE BE AN RFP?

1:07:23 IF NOT WOULD THERE BE INTEREST IN PARTNERING TO PURSUE FEDERAL OR FOUNDATION FUNDS TO CONDUCT A RIGOROUS EVALUATION?

1:07:32 SO THAT'S A GOOD UM YOU KNOW EVALUATION STARTS AT THE BEGINNING NOT AT THE END SO THAT'S A REALLY GOOD QUESTION TO RAISE RIGHT NOW JOANNE AS WE'RE ALL GETTING UP OFF THE GROUND, I KNOW THAT'S SOMETHING THAT AT CDA WE HAVE BUILT INTO OUR WORK PLAN. I'D LOVE TO HEAR FROM OTHERS.

1:07:51 AND FOR PATH AND CAL AIM WE HAVE BECAUSE OF OUR STCS WITH THE FEDERAL GOVERNMENT WE DO HAVE EVALUATION REQUIREMENTS THERE ANYONE ELSE CAN SPEAK TO UM WE'RE WE WILL DEFINITELY BE EVALUATING HOW THESE PROGRAMS AND INITIATIVES ARE WORKING FOR US AND WE HAVE OUR INTERNAL FOLKS. AND AS OPPORTUNITIES PRESENT THEMSELVES, WE'LL EXPLORE EXTERNAL OPTIONS AS I WELL SAY THAT FOR THE CNA PROGRAM I WAS DESCRIBING THROUGH THE HIGH ROAD TRAINING PARTNERSHIPS THERE IS A AN ONGOING EVALUATION FOR ALL OF THE HRTPS AS THEY'RE CALLED THROUGH THE UC LABOR CENTERS AT BOTH UC BERKELEY AND UCLA AND ACTUALLY YOU SEE MERCED BUT I REALLY LIKE WHAT I'M HEARING IN JOANN'S QUESTION ABOUT A BROADER EVALUATION OF ALL OF THESE PROGRAMS TOGETHER TO REALLY EVALUATE THEIR COLLECTIVE IMPACT WHICH I THINK IS SOMETHING WE SHOULD BE TALKING ABOUT GREAT POINT

1:09:02 SUSAN I WOULD JUST PLUS ONE TO WHAT ABBY SAID AND TO JOIN HIS QUESTION THAT UM WE AT FOR CALHS AND I'M SURE FOR LWDA AS WELL UH OUTCOMES OUTCOMES OUTCOMES AND UNDERSTANDING AND FROM AN EVIDENCE-BASED PERSPECTIVE WHAT IS WORKING AND WHAT IS NOT AND UH

1:09:22 WE NEED TO BE DOING MORE OF IT SO IF ANYBODY'S INTERESTED IN ASSISTING, PLEASE UH REACH OUT BECAUSE I I DO THINK THAT THOSE KIND OF BIGGER PICTURE UH QUESTIONS LIKE ABBY JUST MENTIONED ARE IMPORTANT ONES TO BE LOOKING AT ESPECIALLY WHEN SUCH HISTORIC INVESTMENTS ARE BEING MADE

1:09:40 GREAT AND ALL RIGHT GO AHEAD OH I JUST WANTED TO SAY THAT ALSO UM EVALUATION IS WRITTEN INTO OUR STATUTORY FRAMEWORK FOR OUR CAREER PATHWAYS SO THAT IS A YES FOR US TOO

1:09:51 IT'S GREAT IT'S GOING TO STAY THE SAME FOR DEPARTMENT OF DEVELOPMENTAL SERVICES WE WILL BE ENGAGING OUR STAKEHOLDERS TO DEVELOP OUTCOME MEASURES AND WE'LL CONTINUE TO EVALUATE BOTH OF THE INITIATIVES AS WELL

1:10:03 EXCELLENT I THINK THIS IS FOR JOSEPH OR ANASTASIA. HOW WILL THE STATE DETERMINE WHO WAS EMPLOYED BY CBAS MSSP OR PACE PROGRAMS FOR A MINIMUM OF TWO MONTHS DOING DURING THE MARCH 2020 TO MARCH 2021 ELIGIBLE PERIOD FOR THE INCENTIVE PAYMENT?

1:10:23 RIGHT AND I I CAN I CAN TAKE THAT ONE AND SO THAT'S ACTUALLY SOMETHING THAT UM WE'RE ACTIVELY WORKING ON RIGHT NOW

1:10:30 THIS INITIATIVE IS JUST SLIGHTLY MORE DIFFICULT THAN THE CORRESPONDING IHSS CARE ECONOMY PAYMENTS WHERE UNFORTUNATELY ALL OF OUR VARIOUS DIRECT CARE DIRECT SERVICE WORKERS ARE NOT ENROLLED THROUGH ONE SYSTEM AND SO UM ONE THING THAT WE'RE DOING AS A FIRST STEP IN THIS PROCESS AND IT DOES MEAN THAT THAT PAYMENTS WON'T BE COMING OUT

1:10:55 AS QUICKLY FOR THE NON-HSS POPULATION BUT UM UM BUT WE ARE PRIORITIZING THIS PROCESS UM IS ENGAGING UM TO UM WE'LL BE ENGAGING UM WITH A A CONTRACTOR TO BASICALLY PUT TOGETHER A PROCESS FOR APPROPRIATE IDENTIFICATION OF ALL ELIGIBLE INDIVIDUALS BECAUSE WE MAY BE HAVING TO WORK WITH MANY OF THESE ARE AGENCY PROVIDERS SO WE'LL BE HAVING TO WORK WITH VARIOUS AGENCIES TO IDENTIFY THE ACTUAL IMPACTED WORKERS IDENTIFYING A PROCESS FOR PAYMENT TO REACH THOSE WORKERS BECAUSE

1:11:26 THE PAYMENTS ARE NOT INTENDED FOR THE AGENCIES THEY'RE INTENDED FOR THE ACTUAL WORKERS UM AND THEN UM FACILITATING PAYMENT OUT AS WELL AS IF DETERMINED NECESSARY A RECONCILIATION PROCESS UM SO DEFINITELY UM WE RECOGNIZE THE IMPORTANCE OF THAT PROCESS AND ARE WORKING TO PUT TOGETHER AN APPROPRIATE IDENTIFICATION PROCESS

1:11:53 EXCELLENT I SEE CLAIRE RESPONDING TO THIS ONE BUT WE HAVE A QUESTION FROM NICOLE HOWELL CAN YOU SHARE SOME SPECIFICS ABOUT WHAT IT MEANS AROUND THOSE WITH PRIOR CRIMINAL HISTORY? FOR EXAMPLE, WILL THE DEPARTMENT OF SOCIAL SERVICES REMOVE SOME OF THE BARRIERS TO THE BACKGROUND SCREENING TO ALLOW FOLKS WITH CERTAIN CONVICTIONS TO AUTOMATICALLY PASS WITHOUT THE APPEAL PROCESS? HOW WILL WE WIDEN THE PIPELINE WHILE ALSO PROTECTING THOSE CLIENTS WHO EXPERIENCE DEMENTIA AND ARE MORE VULNERABLE?

1:12:18 THANKS YEAH AND THERE WAS ALSO A QUESTION WHICH I ANSWERED IN CHAT AROUND UH ELDER ABUSE AND WHETHER PEOPLE UH ELDER ABUSE CONVICTIONS COULD UH WORK AS UH DIRECT CARE WORKFORCE? I DON'T WANT TO ANSWER THAT FOR EVERY DEPARTMENT. I'LL SAY IN IHSS UM ELDER ABUSE IS WHAT'S CONSIDERED A TIER ONE CRIME AND IS UM IF YOU'VE HAD A CONVICTION IN THE LAST 10 YEARS YOU CANNOT WORK AS AN IHSS PROVIDER UM AND THERE'S NO EXEMPTION TO THAT

1:12:49 SO I I PUT A LINK TO MORE INFORMATION IN THE CHAT ABOUT THAT UM DIRECTLY TO NICOLE'S QUESTION UM THANKS FOR ASKING RIGHT NOW.

1:12:56 THERE HASN'T BEEN DISCUSSION ABOUT SORT OF CHANGING OUR CRIMINAL BACKGROUND RULES BUT I THINK IT MAY BE APPROPRIATE TO HAVE CONVERSATIONS ABOUT UM THERE ARE RULES FOR PEOPLE TO APPLY FOR EXEMPTIONS AND THERE ARE WAYS THAT PEOPLE CAN GRANT UH INDIVIDUAL EXCEPTIONS FOR LIKE SAY I WANT TO EMPLOY MY SON AND MY SON HAS A CRIMINAL HISTORY

1:13:14 I COULD GRANT HIM AN EXCEPTION TO BE MY UM MY IHSS PROVIDER SO IT MAY BE APPROPRIATE FOR US TO MAKE SURE THAT PEOPLE HAVE THAT INFORMATION UNDERSTAND HOW TO APPLY UM AND IF THE STAKEHOLDER COMMUNITY WOULD LIKE TO HAVE A LARGER CONVERSATION ABOUT UH WHAT CRIMES ARE INCLUDED AND HOW WE LOOK AT THEM CERTAINLY THE DEPARTMENT'S INTERESTED IN HAVING THOSE CONVERSATIONS BUT WE DO ALWAYS WANT TO HOLD AT OUR CORE UM HOW DO WE CONTINUE TO MAKE SURE PEOPLE ARE SAFE AND AND HOW DO WE BALANCE UM THE PIECES THAT DARCI TALKED ABOUT?

1:13:45 AROUND MAKING SURE THAT WE'RE GIVING OPPORTUNITIES TO PEOPLE BUT THAT WE'RE ALSO KEEPING UM AN APPROPRIATE CHECK ON ON SAFETY FOR OUR CONSUMERS.

1:13:58 THANK YOU CLAIRE AND YOU MENTIONED THE STAKEHOLDER PROCESS. WE HAVE A QUESTION FROM ANDREA ROBERT

1:14:04 GREAT INFORMATION. WILL A COPY OF THIS PRESENTATION BE AVAILABLE? I HAVE DECADES OF EXPERIENCE AS A CNA AND HAVE ADVOCATED FOR THESE GOALS. HOW CAN A PERSON BECOME A STAKEHOLDER MEMBER?

1:14:15 SO WE WILL HAVE A SLIDE AT THE CONCLUSION OF THIS UM FOR THE TOGETHER WE ENGAGE SO THAT WE CAN KEEP TRACK OF EVERYBODY AND YOU DID REGISTER FOR THIS SO WE CAN FOLLOW UP WITH YOU BUT LET'S HEAR FROM EACH DEPARTMENT ABOUT STAKEHOLDER OPPORTUNITIES TO INFLUENCE THIS PROCESS AS IT MOVES FORWARD

1:14:37 I DIDN'T START ON IHSS SO WE HAVE HAD TWO LISTENING SESSIONS AROUND OUR CAREER PATHWAYS ONE WAS JUST LAST WEEK UM WE'RE LOOKING AT WHETHER WE'D LIKE TO HAVE ANOTHER ONE UM IN THIS MONTH OR IN MARCH BUT BUT NO DECISIONS YET ON THAT AND UM

1:14:51 WE WILL BE CONTINUING TO ENGAGE WITH STAKEHOLDERS SORT OF THROUGHOUT THIS PROCESS BECAUSE AS YOU CAN SEE WE'RE BOTH UM YOU KNOW SORT OF BUILDING THE PLANE WHILE WE'RE CONTINUING MAKING SURE THAT WE'RE CONTINUING TO GET INPUT AS WE CAN BUILD IF UP ALSO WE HAVE ABOUT UM AN EMAIL BOX THAT YOU CAN SEND COMMENTS TO [MUSIC]

1:15:30 CLAIRE WE'RE USING WE'RE LOSING YOU NOW UM PERHAPS YOU COULD SHARE THAT EMAIL BOX WITH US AND WE'LL MAKE SURE IT'S IT'S ENTERED FOR EVERYBODY

1:15:43 OTHER STAKEHOLDER OPPORTUNITIES

1:15:50 WELL I CAN I CAN SPEAK TO THE DEPARTMENT OF AGING WE HAVE AN ALL STAKEHOLDER UH BRIEFING UH THIS WEEK ON FEBRUARY 3RD AND THEN WE WILL BE UM ROLLING OUT SPECIFIC TARGETED STAKEHOLDER UH FORUMS FOR OUR NON-IHS IHSS

1:16:09 HCBS INITIATIVE AT THE DEPARTMENT OF AGING SO FORUMS LIKE THIS FOCUS JUST ON THAT PIECE OF THE WORK WILL BE HAPPENING STARTING LATER THIS SPRING

1:16:21 OTHERS WANT TO TALK ABOUT FORMAL STAKEHOLDER PROCESS

1:16:27 WE AT THE DEPARTMENT OF DEVELOPMENTAL SERVICES ARE CURRENTLY WORKING TO DEVELOP OUR STAKEHOLDER WORK GROUP AND SO CONSIDERING INDIVIDUALS FOR THE DSP WORKFORCE TRAINING AND DEVELOPMENT BUT ALSO TO PROVIDE SOME INPUT ON THE BILINGUAL DIFFERENTIAL INTERESTED INDIVIDUALS CAN EMAIL INFO.DDS.CA.GOV

1:16:54 GREAT AND JUST TO ADD IN FROM A DEPARTMENT OF HEALTHCARE SERVICES PERSPECTIVE THERE WILL BE ADDITIONAL STAKEHOLDER OPPORTUNITIES UM DURING THE ROLLOUT OF UM THE INITIATIVES I SPOKE TO BOTH PATH AND UM THE NON-HSS HDBS SPENDING PLAN UM REGULARLY DHCS MAKES UPDATES AVAILABLE ON THESE SIGNIFICANT INITIATIVES THROUGH OUR REGULAR STAKEHOLDER UPDATES THAT GO OUT TO PROVIDE INFORMATION ABOUT UPCOMING

1:17:24 STAKEHOLDER MEETINGS IF YOU'RE NOT ON THE DHCS STAKEHOLDER MAILING LIST IF YOU WANT TO MESSAGE ME IN THE CHAT

1:17:35 I CAN DEFINITELY SEND A MESSAGE AND I CAN DEFINITELY ENSURE I WORK TO FACILITATE THAT PROCESS IS ALSO IN THE PROCESS OF ENGAGING OUR STAKEHOLDERS AND WE ARE LOOKING AT OPPORTUNITIES TO CONTINUE TO ADD TO THAT LIST RIGHT NOW WE'VE HAD A VERY TARGETED SPECIFIC LIST BUT AS WE IDENTIFY THE OPPORTUNITIES UM THAT WE THINK THAT WE'RE GOING TO NEED TO HAVE OTHER OUTSIDE EXPERTS FOR EXAMPLE

1:18:15 SOMEBODY WHO HAS EXTENSIVE CNA EXPERIENCE UM WE CERTAINLY WOULD BE HAPPY UM TO REACH OUT WE WILL PROBABLY DO THIS FORMALLY AND INFORMALLY BUT IF YOU WANT TO SEND ME UM YOUR EMAIL IN THE CHAT THEN I CAN PROVIDE YOU WITH A CONTACT LINK AFTER I'VE IDENTIFIED WHO THAT IS WITHIN HCAI

1:18:40 AND I'LL CIRCLE BACK TO THE MASTER PLAN FOR AGING HAS A NUMBER OF STAKEHOLDER ENGAGEMENT PROCESSES THE ONE THAT COMES TO MIND THAT'S THE MOST OBVIOUS FIT WITH THE DIRECT CARE WORKFORCE IS DACLAC THE DISABILITY AND AGING COMMUNITY LIVING ADVISORY COMMITTEE AND WE ALSO HAVE AN EQUITY WORK GROUP AND THERE ARE OTHERS THAT MEET REGULARLY AND WORKFORCE IS A REGULAR TOPIC ON THOSE AGENDAS

1:19:08 SO NOW I WANT TO MOVE TO BILL PELTER'S QUESTION ALTHOUGH IT WAS MADE CLEAR THAT WE WOULD HEAR MORE ABOUT ADDRESSING AFFORDABILITY FOR INDIVIDUALS REQUIRING CARE COULD WE GET SOME HINTS ON WHAT IS BEING CONSIDERED PARTICULARLY FOR INDIVIDUALS WHO CURRENTLY DO NOT QUALIFY FOR IHSS OR HAVE A HIGH SHARE OF COST?

1:19:34 SO BILL I'LL I'LL TAKE UH THE FIRST UM STAB AT THAT AT THE DEPARTMENT OF AGING SO UM PART OF OUR UM YOU KNOW ONE OF THE GOALS THAT I SHARED IS THAT WE WANT TO LOOK BACK IN 2025 AND SEE THAT WE'VE MADE THE DEPARTMENT AND THE SYSTEM STRONGER

1:19:51 TO SUPPORT ALL CALIFORNIANS AND THIS IS ONE OF THE WAYS THAT WE'RE LOOKING AT HOW WE CAN LEVERAGE THESE STATE AND FEDERAL DOLLARS TO BUILD SYSTEMS THAT ARE SUSTAINABLE PAST THE EXPIRATION OF THE HOME AND COMMUNITY-BASED SERVICES SPENDING PLAN

1:20:07 WHICH IS TIED TO MEDI-CAL MANY OF THESE DOLLARS ARE MEDICAID DOLLARS THAT WE'RE TALKING ABOUT TODAY SO THEY ARE DIRECTLY LINKED TO THE MEDI-CAL PROGRAM BUT I'LL LET OTHERS JUMP IN THERE

1:20:26 I WOULD JUST ALSO MENTION THIS IS NOT IN OUR CDSS WHEELHOUSE BUT THERE IS THE LONG-TERM CARE INSURANCE TASK FORCE THAT'S BEEN SET UP UM AND I WILL ALSO PUT THAT LINK IN THE CHAT UM AND THAT IS ALSO A SPACE FOR SOME OF THESE AFFORDABILITY ISSUES AND AVAILABILITY OUTSIDE

1:20:52 GREAT LENGTH CLAIRE THANK YOU OTHERS ON THE AFFORDABILITY

1:20:59 I'M SORRY SUSAN I JUST WANT TO ADD ONE MORE THING WHICH IS UM DHCS WANTS TO TALK MORE ABOUT THIS BUT THERE ARE ALSO DISCUSSIONS OF EXPANSION AND THINGS THAT ARE HAPPENING TO EXPAND ACCESS TO MEDI-CAL WHICH ALSO MIGHT HELP ADDITIONAL PEOPLE UM AFFORD UH HOME CARE

1:21:18 GREAT UM GOING BACK TO ANONYMOUS ANY PLANS IN THE WORKS TO REVIEW AND ENHANCE THE TRAINING REQUIREMENTS FOR HOME CARE AIDES?

1:21:32 I HAVEN'T HEARD ANYTHING WE LICENSED HOME CARE AIDES AND UNDER CDSS BUT UM I HAVEN'T HEARD ANYTHING ABOUT EXPANDING PART OF THE CDA WORK PLAN IS WE'RE CURRENTLY EVALUATING THE TRAINING REQUIREMENTS FOR HOME CARE AIDES SO WE'RE ASSESSING UM AND EVALUATING WHAT EXISTS CURRENTLY AND THAT IS POTENTIAL FOR STIPENDS AND INCENTIVES WITH ENHANCED TRAINING REQUIREMENTS

1:22:06 ALL RIGHT SO I'M WE'VE GOT FIVE MINUTES REMAINING I WANT TO MAKE SURE WE GOT TO ALL THE QUESTIONS IN CHAT.

1:22:14 ARE YOU WORKING WITH THE CALIFORNIA COMMUNITY COLLEGE DISTRICT AND DEPARTMENT OF EDUCATION ADULT ED DIVISION TO PROVIDE INPUT ON UPCOMING TRAINING FOR PATH?

1:22:35 JOSEPH OR ANASTASIA ANY ANY COR COMMUNICATION WITH THE COMMUNITY COLLEGE DISTRICT OR DEPARTMENT OF ED? I THINK ANASTASIA HAD TO STEP AWAY AND I CAN TAKE THAT QUESTION BACK TO PROVIDE RESPONSE BACK UM

1:22:53 UM BUT DEFINITELY SO I'D COMMIT TO THE QUESTIONS GREAT WELL I THINK WE'LL WE'LL CLOSE. WITH TWO PEOPLE ASKED ABOUT HOW WOULD BUILD BACK BETTER IF IT'S PASSED HELP ADDRESS DIRECT CARE WORKFORCE NEEDS IN CALIFORNIA?

1:23:05 SO GOING BACK TO THE TITLE OF TODAY'S WEBINAR WE'RE FOCUSED ON CURRENT INITIATIVES FUNDED IN THIS YEAR'S STATE BUDGET WE HEARD FROM PRESENTERS ABOUT THE GOVERNOR'S JANUARY 10TH BUDGET THAT GOES EVEN BOLDER WITH 1.7 BILLION DOLLARS IN WORKFORCE PROPOSALS AND THE LEGISLATURE IS NOW JUST GETTING UNDERWAY

1:23:31 IN ADDITION THERE IS POTENTIAL OPPORTUNITY AT THE FEDERAL LEVEL WITH BUILDBACK BETTER THAT WE'RE ALL WATCHING CLOSELY UM ANYBODY WANT TO ADDRESS THAT?

1:23:43 SPECIFICALLY I CAN TAKE UM TAKE A TURN ON THAT SUSAN THANKS FOR THE QUESTION I THINK IT'S A GREAT QUESTION AND UM AS SUSAN SAID I THINK WE'RE ALL WAITING WITH BATED BREATH TO SEE HOW HOW THAT PROPOSAL PLAYS OUT IN WITHIN THE FEDERAL GOVERNMENT AND YOU KNOW WE'VE GOT THREE MINUTES WE COULD PROBABLY HAVE TAKEN THE FULL 90 MINUTES JUST TO TALK ABOUT THE IMPLICATIONS UH OR THE POTENTIAL IMPLICATIONS OF BUILDBACK BETTER I THINK THAT IN TERMS OF COVERAGE ISSUES UM PRESCRIPTION ISSUES A LOT OF OUR WORKFORCE ISSUES REALLY COULD

1:24:21 BE LIFTED UP BY THE PASSING OF BUILDBACK BETTER BUT I WILL SAY THAT ANY FEDERAL DOLLARS WOULD BE AMPLIFYING THE QUITE HUGE INVESTMENT THAT WE'RE MAKING AT A STATE LEVEL SO WHILE OF COURSE WE WOULD WELCOME FEDERAL ASSISTANCE I I DO THINK THAT OUR STATE DOLLARS AND IN STANDALONE IN A LOT OF THE INVESTMENTS THAT WE MADE LAST YEAR AND THAT ARE IN THE PROPOSED BUDGET THIS YEAR REALLY CAN MAKE A HUGE DIFFERENCE IN THE LIVES OF UH WORKFORCE MEMBERS AND SO UM WHILE YES IT WOULD IT WOULD BE GREAT IF THAT WAS PASSED I I DO DON'T I I DON'T WANT TO NEGATE THE HUGE INVESTMENTS THAT WE'RE MAKING IN THE STATE OF CALIFORNIA. ABBY I SAW YOU CAME OFF ME DO YOU WANT TO ADD TO THAT

1:25:08 NO I THINK YOU DID IT WELL

1:25:15 OKAY WELL SPECIAL THANKS TO ALL OF OUR PANELISTS AND PRESENTERS AND A HUGE THANKS TO EVERYONE WHO JOINED WE HAD ABOUT 175 PEOPLE ON HERE AT ONE POINT WE REALLY APPRECIATE THE QUESTIONS AND COMMENTS THAT WERE ENTERED INTO THE Q AND A

1:25:33

AND WE'LL BE FOLLOWING UP UM IF ANYBODY WANTS TO BE SURE THEY HEAR MORE ABOUT WHAT'S GOING ON WITH BOTH AGENCIES AND ALL OF THE DEPARTMENTS PLEASE SEND YOUR QUESTIONS OR COMMENTS TO THIS EMAIL ADDRESS AT [ENGAGE AGING.CA.GOV](mailto:engage_aging.ca.gov) AND WE'LL MAKE SURE IT GETS TO THE RIGHT PERSON FROM TODAY'S WEBINAR I WANT TO TURN US BACK TO ABBY AND DARCI WHO OPENED US ON BEHALF OF THE TWO AGENCIES AND GIVE THEM A MOMENT TO MAKE CLOSING REMARKS AND AGAIN THANK YOU EVERYBODY FOR JOINING TODAY AND PARTICIPATING

1:26:09 WELL I CAN START AND AND SAY THAT I JUST AM LEANING EVEN MORE INSPIRED THAN I WAS WHEN WE STARTED UM BOTH BY THE UM PLANS THAT ARE ALREADY IN THE WORKS AND UM JUST KNOWING HOW MUCH MORE WE CAN DO IF THE NEW PROPOSAL UM COMES TO PASS AND I THINK WE'RE ALL REALLY OPTIMISTIC THAT AND WITH THE SUPPORT IT'S GETTING SO FAR WE COULD DO EVEN MORE I ALSO REALLY APPRECIATE THE QUESTIONS RAISED TODAY UM PARTICULARLY AROUND UM HOW TO BREAK BARRIERS UM FOR CAREER ADVANCEMENT UM IN IN HEALTH CARE AND TO REALLY CHALLENGE SOME OF THE BARRIERS THAT EXIST FOR PEOPLE WITH UM YOU KNOW CRIMINAL JUSTICE BACKGROUND SO I ALSO LEAVE THIS JUST REALLY UM KIND OF INSPIRED TO ADDRESS THOSE THOSE PARTICULAR CHALLENGES I JUST REALLY WANT TO THANK THE THE PANELISTS UM AND UM AND AND THE PARTICIPANTS FOR THEIR INSIGHTFUL QUESTIONS AND TO EVERYBODY UM AT CDA AND CERTAINLY JULIA UM FOR PUTTING TOGETHER SUCH A COMPREHENSIVE UM WEBINAR TODAY.

1:27:26 GONNA WRAP UP YES THANK YOU ABBY AND THANK YOU TO THE DEPARTMENT OF AGING TEAM UH OUR COLLEAGUES FROM LWDA AND ALL OF THE DEPARTMENTS FROM HEALTH AND HUMAN SERVICE AGENCY THAT WERE REPRESENTED TODAY HCAI SOCIAL SERVICES DEVELOPMENTAL SERVICES

1:27:45 I'M MISSING SOMEONE BUT UH THANK YOU ALL TO THOSE WHO PARTICIPATED UM ABBY STOLE MY WORD IN USING THE WORD INSPIRED BECAUSE I DO THINK THAT THERE IS SO MUCH WORK THAT NEEDS TO BE DONE IN THIS ARENA BUT IT REALLY UH INSPIRES ME TO HEAR EVERYTHING THAT HAS BEEN HAPPENING IN IN THE CURRENT YEAR BUDGET AND EVERYTHING THAT IS PROPOSED IN THE UPCOMING BUDGET

1:28:10 AND REALLY TO HEAR THE VOICES OF ALL ALL OF YOU WHO HAVE CALLED IN TO SHARE YOUR EXPERIENCES AND SHARE YOUR QUESTIONS TODAY YOUR FRONTLINE EXPERIENCE AND YOUR WORK ON THE GROUND IS EXACTLY WHAT WE NEED TO INFORM THE POLICIES

1:28:24 THE POLICIES THAT WE NEED TO IMPLEMENT IMPROVEMENTS IN THIS AREA SO THANK YOU SO MUCH AND PLEASE UM STAY ENGAGED WITH US AND STAY ENGAGED WITH THIS TEAM UH BECAUSE WE NEED TO HEAR YOUR VOICES THANKS SO MUCH SUSAN

1:28:40 ALL RIGHT EVERYBODY HAVE A WONDERFUL REST OF THE DAY AND A GREAT WEEK THANK YOU SO MUCH FOR JOINING WE'LL BE BACK IN TOUCH AS THE CONVERSATION CONTINUES