

**ALZHEIMER'S DISEASE AND RELATED CONDITIONS  
ADVISORY COMMITTEE BY-LAWS**

Section 1568.17(a) of the Health and Safety Code established the Alzheimer's Disease and Related Conditions Advisory Committee (ADRCAC).

**I. MEMBERSHIP COMPOSITION**

The ADRCAC shall be composed of at least 17, but not more than 21 members, which shall include, but not be limited to, all of the following:

1. One representing the field of academic medical research.
2. One representing the field of social research.
3. One representing the field of behavioral health.
4. One representing organization providing adult day care services focused on persons living with Alzheimer's disease or related conditions.
5. One representing the California Alzheimer's Disease Centers.
6. Two representing families of persons directly affected by Alzheimer's disease or related conditions.
7. Two representing organizations providing services to persons living with Alzheimer's disease or related conditions.
8. One representing a consumer organization representing persons with Alzheimer's disease or related conditions.
9. One representing a member of the State Bar who is familiar with the legal issues confronting those living with Alzheimer's disease or related conditions and their families.
10. Two people who have been diagnosed with Alzheimer's disease or a related condition.
11. The Executive Director of the California Commission on Aging or the director's designee.
12. The Secretary of California Health and Human Services (CalHHS) or their designee.
13. Two ex officio, nonvoting members, consisting of one Senator appointed by the Senate Committee on Rules and

one Member of the Assembly appointed by the Speaker of the Assembly. These members shall participate in the activities of the Committee to the extent that their participation is not incompatible with their respective positions as Members of the Legislature.

14. Up to four additional members selected by the Secretary of CalHHS.

## **II. TERMS OF OFFICE**

- A. Members described above in 1-11 and 14 shall serve at the pleasure of the Secretary of CalHHS. Members described in 13 shall serve at the pleasure of their appointing authority. The CalHHS Secretary shall establish fixed three-year terms for each member. A member may be appointed for no more than two consecutive terms. For purposes of continuity, the fixed terms of Committee members shall be staggered.
- B. If a member resigns from the Committee prior to the end of his/her term, or a vacancy occurs as a result of a statutory requirement per Government Section Code 1770, a new member shall be appointed in their place. This new member shall serve for the remainder of the previous member's term. If this constitutes a year or less time, the new member shall be eligible to serve for two more consecutive terms. Otherwise, the new member shall only be eligible to serve one more consecutive term.

## **III. COMPENSATION**

Members shall serve without compensation but shall receive reimbursement for travel and other necessary expenses actually incurred in the performance of their official duties. ADRCAC members are reimbursed for expenses incurred within the following parameters:

- A. ADRCAC members shall submit travel claims in a timely manner to enable CalHHS staff to monitor the travel budget effectively. Travel expenses will be reimbursed for actual expenses up to the maximum

rate allowed by the travel policy.

- B. ADRCAC members shall work with the CalHHS Travel Coordinator to book any flights. The Travel Coordinator can also help members book hotel rooms, if needed. Generally, the least expensive rates are those the State negotiates each year with air carriers.
- C. ADRCAC members using their personal telephone to make long-distance phone calls concerning ADRCAC business can be reimbursed for that expense on their travel claim forms. State travel reimbursement policy requires that a copy of the telephone bill be attached to the travel claim. In addition, the name of the party called must be written on the telephone bill.
- D. A care partner of an ADRCAC members who is living with Alzheimer's disease, or another dementia may be reimbursed for travel to accompany the Committee member on their travel.

#### **IV. DUTIES**

- A. Provide ongoing advice and assistance to the administration and the Legislature as to the program needs and priorities of the target population.
- B. Provide planning support to the administration and the Legislature by tracking, monitoring, and considering recommendations made in the final report of the Governor's Task Force on Alzheimer's (Disease) Prevention and Preparedness, and the California Master Plan for Aging, in addition to other state plans and reports, including the California State Plan for Alzheimer's Disease, as needed.
- C. Appoint a chairperson and vice-chairperson. The Chair and Vice Chair shall each serve for two-year terms. These appointments are renewable until the Chair or Vice Chair's Committee term expires. The Chair controls the agenda and time for public comments.

- D. Meet quarterly. ADRCAC members are expected to attend as many meetings as possible. If a member misses two meetings, the CalHHS Secretary or their designee will send a letter to that member encouraging their attendance and emphasizing the importance of having their expertise involved in Committee deliberations. If a member misses any three meetings in a single fiscal year, the CalHHS Secretary will terminate the member's appointment.
- E. Members may send a designee to any meeting for information and discussion purposes, as long as that designee does not represent a lobbying organization. Such designee is not considered a voting member and therefore is not included in the quorum count. Even if a member sends a designee, they are still considered absent from the Committee meeting. The designee will not be reimbursed for travel expenses.
- F. All meetings of the advisory Committee and any subcommittees thereof, shall be open to the public and adequate notice shall be provided in accordance with Article 9 (commencing with Section 11120) of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government Code.

## **V. DELIBERATIONS AND DECISION MAKING**

- A. A quorum must be present for the ADRCAC to transact business. The presence of a majority of current members, not including designees, shall constitute a quorum. Motions shall be decided by simple majority of the quorum. Any ADRCAC member may request a roll-call vote.
- B. An ADRCAC member may use a proxy if they have participated in a discussion and have to leave prior to the vote. The member will submit the proxy in writing to another ADRCAC member.

## **VI. POLICY AND PLANNING RECOMMENDATIONS**

The ADRCAC shall do all of the following when making policy and plan recommendations:

- A. Consult with a broad range of stakeholders, including, but not limited to, people diagnosed with Alzheimer's disease or related conditions, family members or informal caregivers, community-based and institutional providers, Alzheimer's disease or related conditions researchers and academicians, direct care workforce, the Alzheimer's Association, the California Commission on Aging, and other state entities.
- B. Consider cultural and linguistic factors that impact persons with Alzheimer's disease or related conditions and their families who are from diverse communities.
- C. Review current state policies and practices concerning care and treatment related to Alzheimer's disease and other related conditions, as well as risk reduction, and develop recommendations concerning all of the following issues:
  - i. Community-based support for California's racially, ethnically, culturally, and linguistically diverse people living with Alzheimer's disease or related conditions and their family members or informal caregivers.
  - ii. Choices for care and residence for persons with Alzheimer's disease or related conditions and their families.
  - iii. An integrated public health care management approach to Alzheimer's disease or related conditions in health care settings that makes full use of dementia care practices.

- iv. The dementia training and competence of health care professionals.
- v. Risk reduction, early identification, and intervention through increasing public awareness of Alzheimer's disease and related conditions, as well as brain health.

## **VII. STAFFING**

- A. CalHHS will appoint any staff it may require, within available resources. CalHHS will be responsible for developing and distributing the agenda, notifying the public of Committee meetings, recording Committee meetings and posting meeting materials.
- B. The ADRCAC may utilize staff of the Department of Aging as available and the staff of all other private and public agencies that have an interest in Alzheimer's disease and related conditions if they are willing to provide assistance.