

California Elder and Disability Justice Coordinating Council (EDJCC)

March 5, 2026 | 10:00 a.m. – 1:00 p.m.



Welcome

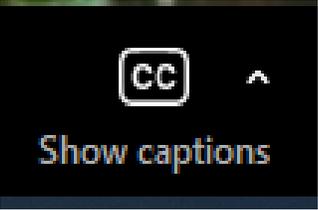


Carroll De Andreis

*Manager, Master Plan for Aging (MPA) Stakeholder Engagement
California Department of Aging (CDA)*

Meeting Accessibility



- **American Sign Language (ASL)** interpreting is provided
- Closed captioning is available during this meeting
- To initiate closed captioning (cc):
 1. Click the cc icon on the Zoom toolbar 
 2. Click “Show captions” to display spoken meeting content as text
 3. Click “View full transcript” to review previous caption text
- If the (cc) icon does not appear on your toolbar, select “More”, then select “Captions” and begin at Step 1 above.

Meeting Logistics



- Meeting slides, materials, and recording will be posted to [CalHHS MPA - EDJCC](#) webpage.
- Council Members: Please update your name display in Zoom by right clicking the upper right corner of your video and selecting “rename.”
- Please turn on your camera while the meeting is in session.

Virtual Meeting Operations



- The chat function is enabled for Council Members, California Department of Aging (CDA) and state staff, and invited guests to share meeting-related resources and information
- The public will be able to view content share in the Chat during the meeting
- The chat and the Question/Answer functions are not enabled for comments and questions from public attendees
- We invite the public to provide comments. Please hold comments until the end of the meeting during the designated Public Comment period
- Additional public comments and questions can be directed to Engage@aging.ca.gov

Public Comment



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



Attendees joining by **webinar (Zoom)**, click the raise hand button to join line. The moderator will announce your name or the last 4 digits of your phone number and will unmute your line.

Note: Public commentators will have 2 minutes.

For additional public comment, email Engage@aging.ca.gov

Council Purpose, Equity Guiding Principles, and Agenda



Ranjana Maharaj

Legal Assistance Developer, CDA

Council Purpose



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

Equity Guiding Principles



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

CalHHS Guiding Principles and Strategic Priorities

Equity Guiding Principles

cont.

1. We recognize that all adults deserve to live free from abuse, neglect, and exploitation.
2. We acknowledge the existence of systemic racism, discrimination, and negative impacts. In order to combat its impacts, we must center equity at all stages of our council's work.
3. Centering around equity does not just mean creating equitable solutions for all older adults and adults living with disabilities but also recognizing that implicit bias exists within all of us. We are committed as a group to acknowledge and explore biases while doing the work of this council.





Equity Guiding Principles

cont.

4. We acknowledge that while older adults and adults living with disabilities have many overlapping interests, they are distinct communities, and any policies that are observed or recommended by this council should examine impacts to each community.
5. We recognize the importance of hearing directly from older adults and adults living with disabilities, their lived experiences should always be centered as we move forward with the work of this council.

EDJCC Council Members



EDJCC Co-Chairs

Susan DeMarois, *Director, CA Department of Aging*

Bertha S. Hayden, *Associate Vice President Justice for Seniors & Dependent Adults, Bet Tzedek*

Current Council Members

Tony Anderson, *Association of Regional Care Agencies*

Jamie Jensen, *California Commission on Aging*

Sandra L. Longnecker, *Riverside District Attorney's Office*

Jamie Levine, *Elder Law and Advocacy*

Vivianne Mbaku, *Justice in Aging*

Jennifer Moore Ballentine, *Coalition for Compassionate Care of California*

EDJCC Council Members

cont.



Alicia Morales, *Adult & Long-Term Care Division Santa Cruz County*

Carla Perissinotto, *University of California San Francisco*

Scott Pirello, *San Diego District Attorney's Office*

Renita Polk, *County Welfare Directors Association*

Tom Scott, *CA State Association of Public Administrators, Public Guardians and Public Conservators*

Jason Sullivan-Halpern, *California Long-Term Care Ombudsman Association*

Janie Whiteford, *California IHSS Consumer Alliance*

EDJCC Council Members

New Council Members

Layla Anderson, *Self Advocate*

Heather Bates, *Transform Health LLC*

Luis Bravo, *Self Advocate*

Ali Chiu, *Institute on Aging*

Aneliza Del Pinal, *Sourcewise & California Association of Area Agencies on Aging (C4A)*

Greg diGiere, *The Arc of California*

Sarah Hooper, *UCSF-UC Law SF Medical-Legal Partnership for Seniors*

Mischa Jackson Kennedy, *Inland Legal Services, Inc.*

Melissa Jacobs, *Sacramento County Senior & Adult Services*

Hannah Lidell, *Disability Rights California*



EDJCC Council Members

cont.

Jennifer Litwak, *PEP Housing*

Elyse Michelle Brummer, *AgeUp*

Monika Pleyer Lee, *San Mateo Age Friendly Coalition*

Bill Proulx, *Senior Network Services*

Daniel Salinger, *Caregiver*

Tabitha Sebastian, *Wise & Healthy Aging*

Carol Sewell, *California Elder Justice Coalition*

Maureen Sullivan, *WEAVE*

David Tetzlaff, *Self Advocate*



Meeting Agenda



- 10:00 a.m. | Welcome and Meeting Logistics
- 10:05 a.m. | Agenda and Guiding Principles
- 10:15 a.m. | Opening Remarks
- 10:25 a.m. | Welcome New EDJCC Members and Subcommittee Chairs
- 10:40 a.m. | Strengthening Adult Abuse Reporting and Response Systems Cross-Agency Collaboration and Systems Alignment
- 11:05 a.m. | Older Adult Behavioral Health Project
- 11:25 a.m. | Break

Meeting Agenda (continued)



- 11:40 a.m. | State Long-Term Care Ombudsman Update
- 11:55 a.m. | Aging and Disability Lived Experience Advisory Board (AD-LEAB)
- 12:10 a.m. | Master Plan for Aging Mid-Point Evaluation & Discussion
- 12:25 p.m. | EDJCC Discussion & Recommendations to California Health & Human Services Agency (CalHHS)
- 12:45 p.m. | Public Comments
- 12:55 p.m. | Closing Comments
- 1:00 p.m. | Adjourn

Welcome



Susan DeMarois

Director, California Department of Aging

EDJCC State Co-Chair

Welcome New EDJCC Members

EDJCC Subcommittees



Bertha Hayden

Associate Vice President Justice for Seniors & Dependent Adults, Bet Tzedek, EDJCC Stakeholder Co-Chair and Legal Services Subcommittee Chair

Jason Sullivan-Halpern

Executive Director, California Long-Term Care Ombudsman Association, Adult Abuse Response Subcommittee Chair

Alicia Morales

Director Adult & Long-Term Care Division & Public Guardian-Conservator for Santa Cruz County, Conservatorship Subcommittee Chair

EDJCC Engagement



**EDJCC Full
Council
Meetings**



Engage@aging.ca.gov



**Workgroup
Meetings”**

Adult Abuse
Response
Subcommittee
Conservatorship
Legal Services



**Listening
Sessions**



**Connect with
Co-Chairs**

Alicia Morales
Bertha S.
Hayden
Jason Sullivan-
Halpern

**Strengthening
Adult Abuse
Reporting and
Response
Systems Cross-
Agency
Collaboration
and Systems
Alignment**



**Strengthening
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**Adult Abuse Response, Legal Services,
Conservatorship Combined Subcommittee
Meetings 2025 Overview**

- Operates under the EDJCC and aligns with California's Master Plan for Aging goals around inclusion, equity, and protection from abuse.
- Focusing on strengthening response systems serving older adults and adults with disabilities.
- Prioritizing cross-reporting clarity, interagency collaboration, and bridging systemic gaps.

The Need for Systems Alignment

Fragmented reporting pathways lead to:

- Delayed interventions
- Duplicative investigations
- Missed protective opportunities
- Older adults and adults with disabilities experience barriers navigating siloed systems
- A coordinated approach improves safety, dignity, and equitable access to justice.

Current Focus (Combined Subcommittees)

Subcommittees are reviewing existing cross-reporting statues and practice gaps.

Identifying inconsistencies:

- When Adult Protective Services (APS) cross-reports to law enforcement
- When law enforcement cross-reports to APS
- Reporting obligations in long-term care settings
- Warm handoffs/referrals to Legal Services

Examining barriers:

- Confidentiality concerns
- Varying interpretations of mandated reporting

Goal in the future is to develop recommendations that strengthen cross-reporting accountability and consistency statewide.

Advancing Cross-System Collaboration

Promoting structured communication between:

- APS
- Legal Services (Title III-B providers and civil legal aid partners)
- District Attorneys
- Local Law Enforcement
- Ombudsman programs
- Multidisciplinary Teams (MDTs)
- Tribal Partners
- Public Guardianship/Conservatorship

Explore:

- Joint Case Reviews
- MDT strengthening
- Data sharing
- Warm handoffs

Identified Gaps

- Inconsistent cross-reporting practices
- Limited understanding of each system's role and authority
- Delays in information sharing.
- Gaps between APS and Legal Services referral follow-through
- Behavioral health and housing instability complicating abuse cases
- Need for clear state level guidance and training
- Fragmented structural and systemic gaps

Moving Towards Recommendations Phase

The subcommittee should contemplate about elevating recommendations based on discussions during subcommittee engagement.

Focus areas may include:

- Cross-reporting
- State-level guidance
- Training
- Strengthening MDT infrastructure
- Positioning this work with the broader Master Plan for Aging
- Emphasis on equity and access to marginalized communities

Adult Abuse Response, Legal Services, and Conservatorship Subcommittees

All subcommittees will collaborate with:

- Legal Services stakeholders (Title III-B alignment)
- APS Workgroup efforts
- Behavioral Health and Housing Policy conversations
- State Long-Term Care Ombudsman

Commitment to:

- Uplift concerns
- Bridging gaps
- Improvement and integration



Council Questions and Discussion



Older Adult Behavioral Health Project: Behavioral Health Services Act Updates

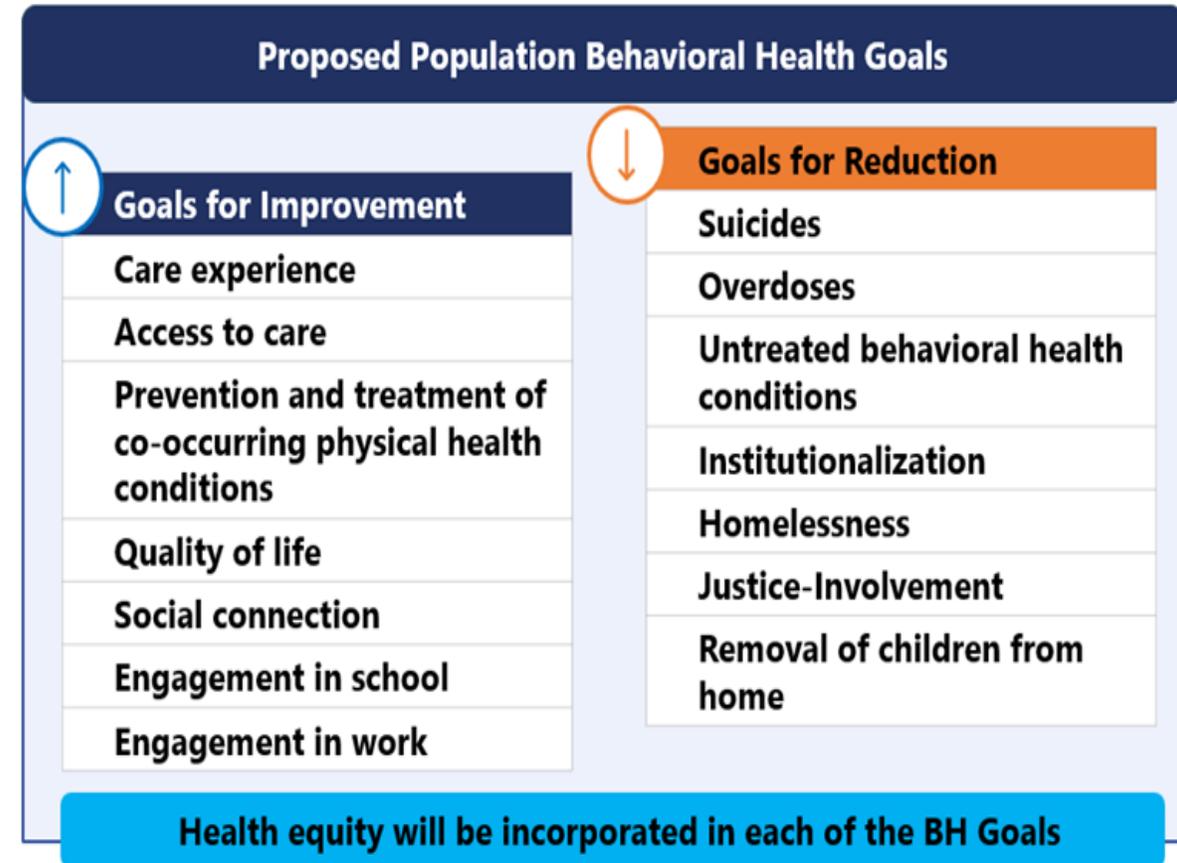
Vivianne Mbaku, Director, California Behavioral Health Advocacy

Why is Behavioral Health Important for Older Adults?

- Behavioral health services are integral in supporting older adults to age with dignity
- Older adults report high rate of loneliness, isolation and depression
- Risk of suicide increases with age, highest for those 85+
- Drug overdoses and deaths among older adults have tripled in the last 20 years
- Complicating factors:
 - Homelessness amongst older adults
 - Access to health care services

History

- [Mental Health Services Act of 2004](#)
- Behavioral Health Services Act of 2024 (BHSA) (2 parts)
 - [Behavioral Health Infrastructure Bond \(AB 531\)](#) (Housing supports)
 - [BHSA \(SB 326\)](#)
 - The state refers to these two bills together as “Behavioral Health Transformation” (BHT)



BHSA Eligibility

Adult Eligibility

- Eligible adults and older adults mean persons who are 26 years of age or older who meet either of the following:
- Meet SMHS access criteria specified in W&I Code section 14184.402, subdivision (c) and implemented in DHCS guidance (only applies to individuals 26 years of age and older) **OR**
- Have at least one diagnosis of a moderate or severe substance use disorder from the most current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) for Substance-Related and Addictive Disorders, with the exception of tobacco-related disorders and non-substance-related disorders.

BHSA Eligibility (continued)

Priority Populations

- Are chronically homeless or experiencing homelessness or at risk of [homelessness](#)
- Are in, or at risk of being in, the justice system
- Are reentering the community from state prison or county jail
- Are at risk of [conservatorship](#)
- Are at risk of institutionalization (The DHCS [ECM Guide](#) defines institutionalization as “broad and means any type of inpatient, Skilled Nursing Facility, long-term, or emergency department setting.”)

Notable Changes

- Eligibility expanded from MHSA
 - Includes treatment for substance use disorder regardless of presence of mental condition
- CDPH takes on behavioral health prevention services
- \$6.38 billion in funding for housing interventions
 - 50% of housing interventions must be used for people who are chronically homeless, with focus on encampments
- No specific age range for “older adults”
- No requirement to be enrolled in Medi-Cal

County Integrated Plans

- BHSA requires each county to draft a 3-year Integrated Plan (IP)
- IP is a prospective global spending plan for all available behavioral health funding, not just BHSA
- DHCS created template
- Drafts Due by March 31
- Final due no later than June 30th

County Integrated Plans (continued)

Plans will include:

- County Demographics and Behavioral Health Needs
- Plan Goals and Objectives
- Community Planning Process
- Comment Period and Public Hearing
- County Behavioral Health Care Continuum Capacity
- Services by Total Funding Source
- Behavioral Health Services Fund Programs
- Workforce Strategy
- Budget and Prudent Reserve

Looking Forward

- Draft County Integrated Plans are currently being released
- Check your local County Behavioral Health Website for Draft Plans and information on Public Comment
- Integrated Plans will be updated annually on the same schedule (March and June dates)
- Justice in Aging will be releasing a Fact Sheet on Older Adult Behavioral Health

County Integrated Plan Links (Non-Exhaustive)

- [Riverside](#)
- [Marin](#)
- [Sacramento](#)
- [Los Angeles](#)
- [San Mateo](#)
- [Kern](#)
- [Contra Costa](#)
- [Glenn](#)

Additional Resources

- [Department of Health Care Services, Behavioral Health County Policy Manual](#)
- [Department of Health Care Services, Behavioral Health Transformation Website](#)



Council Questions and Discussion



Break: 15 minutes



Fay Gordon

State Long-Term Care Ombudsman

Office of the State Long-Term Care Ombudsman

- Increased funding in FY 2025 = increased staffing
- Increased staffing = increased facility visits
- More LTC Ombudsman presence is key to better care quality
- Stay tuned: New Ombudsman poster and brand distributed to LTC Facilities



Council Questions and Discussion

California's Aging and Disability Lived Experience Advisory Board (AD-LEAB)



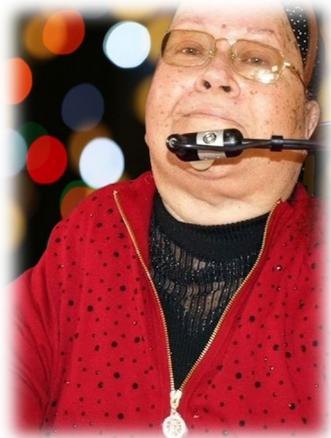
Sarah Steenhausen

Deputy Director, California Department of Aging

David “Jax” Kelly

President, Aging and HIV Institute and Equity Advisory Committee on Aging and Disability (EACAD) member

Meet the Board Members





Council Questions and Discussion

Master Plan for Aging Mid-Point Evaluation & Committee Discussion



Ross Lallian

Chief of Research, California Department of Aging

Lori Peterson

Collaborative Consulting

Miranda Kunkel

Collaborative Consulting



Evaluation Goals

- Assess the implementation elements of the MPA.
- Understand what is working well and what improvements are needed.
- To raise MPA awareness and gain commitment from stakeholders to advance the MPA implementation.



MPA Implementation Element

- State-Leadership
- Cross-Agency Development and Accountability
- Stakeholder and Consumer Engagement
- Data-Driven
- Living Document
- Broad Focus on Aging Throughout the Lifespan

Mid-Point Evaluation: Key Questions



Evaluation Area	Example Questions
Fidelity & Progress	<ul style="list-style-type: none">• To what extent is the MPA being implemented as intended?
Barriers, Challenges, Facilitators & Supports	<ul style="list-style-type: none">• What barriers and challenges hinder the MPA implementation?
Perceived Value & Awareness	<ul style="list-style-type: none">• What would be lost if the MPA implementation elements no longer existed?
Sustainability & Recommendations for Improvement	<ul style="list-style-type: none">• What are recommendations for improving the MPA implementation?

Mid-Point Evaluation: Project Timeline



Project Phase	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept
0. Foundation	[Light blue bar]								
1. Stakeholder Engagement	[Medium blue bar]								
2. Data Review	[Dark blue bar]								
3. Reporting and Recommendations				[Dark blue bar]					
4. Implementation Planning and Dissemination							[Dark blue bar]		



Council Questions and Discussion



Jason Sullivan-Halpern

*Executive Director, California Long-Term Care
Ombudsman Association
Adult Abuse Response Subcommittee Chair*



Council Questions and Discussion

Public Comment



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Meeting Resources



- [Master Plan for Aging \(MPA\) webpage](#)
- [Fifth Master Plan for Aging Annual Report](#)
- [Fifth Master Plan for Aging Annual Report Press Release](#)
- [Older Adult Behavioral Health Resources for Stakeholders](#)
- [MPA Aging and Disability Lived Experience Advisory Board](#)
- [Department of Health Care Services, Behavioral Health Transformation Website](#)
- [Department of Health Care Services, Behavioral Health County Policy Manual](#)



Meeting Materials & Future Dates

All meeting materials and recording are posted after this meeting on [CalHHS EDJCC Meeting Materials](#) webpage.

Future Meeting Dates

June 11, 2026 at 10:00 a.m. – 1:00 p.m.

October 8, 2026 at 10:00 a.m. – 1:00 p.m.

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