**Q1.** What accomplishments of the Olmstead Committee would you like to highlight for the next administration?

1. I would like to see that we start addressing the issue of: Self-Determination, is something that is really needed at: Olmstead.
2. Respondent skipped this question
3. Respondent skipped this question
4. Advocating for increased access to community based services and supports for people with disabilities, mental health needs & seniors - and sharing info with each other.
5. Respondent skipped this question
6. not sure what I could point to as accomplishments - It has been beneficial to have a forum to receive direct updates and hear the input of consumers.
7. Opportunity for ongoing discussions with DHHS managers including updates on policies and programs and chance to share concerns and insights.
8. Preservation and highlighting IHSS as a primary service in maintaining independence at home verses institutionalization for those needing LTSS. Champion for integration of healthcare and LTSS.
9. Continuous open communication with the administration through the Secretary has been very effective and helpful for the administration
10. I have been a member for approximately 2 years and I'm not aware of a significant accomplishment attributable to the committee during my tenure.

**Q2.** What do you think the value the Olmsted Committee is?

1. That of knowing what Olmstead Stands for, so we can share it in our Communities constantly.
2. Respondent skipped this question
3. community connection to the administration provider connection to the administration
4. At its best it is sharing credible info - from advocates and from state policymakers (departments). At its best it can be a starting point or help expand ideas that increase disability and senior and mental health rights. It also provides consistent and on-going vehicle of bringing together department heads and top staff with advocates that at least creates basis for discussion on critical issues - even if it does not always end up with the solutions or outcomes that advocates want to see.
5. community connection to the administration provider connection to the administration
6. Hopefully it is that key state leaders are engaging directly in hearing from the consumer and the provider communities.
7. Linking the administration to key stakeholders.
8. Informing the Secretary and Agency of issues that impede service delivery and systems that work against LTSS for those at highest risk of institutionaliz. Informing the Secretary and Agency of how policies and proposed policy changes impact people at the ground and service delivery level.
9. Using the expertise of the members - it is a diverse group. The face to face contact with the directors of the departments and the secretary is really important
10. The committee has become a clearinghouse and sounding board. In my view, it has become passive, not active. The value is the participation of high level officials and diverse membership - the right parties are at the table.

**Q3.** What could make the Olmstead Committee more effective?

1. See that the Meetings start more on time! They are a lot of issues to cover at every Meeting that have to be addressed.
2. Respondent skipped this question
3. more diverse and influential membership connection to the legislative body connection to health and social service providers
4. In addition to meeting regularly as we do - also meet in response to situations or events where ideas and advice from advocates (and departments) can be useful. Consult the committee (especially advocates) in preparation for the next budgets each year and May Revise.
5. more diverse and influential membership connection to the legislative body connection to health and social service providers
6. Identification/carryover of issues from one meeting to the next, including responsive reports from state officials on specific actions
7. Setting priorities for areas to focus on and work on.
8. Require that departments work towards a collaborative, system alignment approach to a more comprehensive approach to delivery of LTSS. Further reduce fragmentation and barriers in the application process and access of services.
9. Better audio for participation through Conference Calling. It is very difficult to hear everyone -
10. Setting priorities. The scope is far too broad and purpose is unclear to me as a member. We seem to be all things to all people/all departments. The committee members aren't well utilized - there are no workgroups or tasks assigned to use our expertise.

**Q4.** What should be the focus of the Olmstead Committee in the next administration?

1. The Focus is to get all of us who are on: SSI into: SNAP by: Next Summer. It will get us the Food for us to survive!
2. Respondent skipped this question
3. medical and social care for seniors safe and appropriate home care and assisted living
4. Some of the focus will depend on what the makeup of Congress will be in 2019. If both houses remain Republican, our focus will need to be how we collectively fight to defend Medicaid - and the affordable care act, Medicare and Social Security, etc. that are all critical to people with disabilities, mental health needs and seniors. If one of the houses is controlled by the Democrats, we still need to watch and be active on those issues (especially in budget deals impacting the federal budgets for 2020 and beyond) - but also work to improve and expand HCBS that are linked to outcomes, person centered planning and goals that includes not just long term services & supports, but housing, transportation and employment.
5. medical and social care for seniors safe and appropriate home care and assisted living
6. Respondent skipped this question
7. Improving quality of LTSS and coordination across programs based in evidence of what is most likely to work.
8. Assess state departmental structure in light of improving a see less system of LTSS
9. Focus on providing services and supports for people with ID/DD who are involved in, and convicted of crimes. Jail is not a suitable option.
10. In my opinion, it doesn't matter what we focus on we just need to focus on something! And a solution framework, not problem statement. Perhaps "care transitions" could be a unifying theme, if the goal is to decrease institutionalization then we could focus on ED visits and hospital discharges as "ground zero" for transitions. We could use data from OSHPD, Medi-Cal, DSS, public health etc. We see a strong correlary with our population (Alzheimer's) with evictions and transfers precipitated by behavioral health manifestations of the disease.

**Q5.** What are the top three policy areas you would like the Olmstead Committee to focus on?

1. That of: Housing, Transportation and Emergency Preparedness.
2. Respondent skipped this question
3. medical care and safe housing for all seniors home care availability for all needy individuals nutritional needs for senior and disabled individuals
4. Housing, employment, community-based long term services and supports (assuming at least one of the houses in Congress is of a different party - if not - if Republicans maintain control of both houses, priority will need to focus on defending Medicare, Medicaid, Social Security and the Affordable Care Act.
5. medical care and safe housing for all seniors home care availability for all needy individuals nutritional needs for senior and disabled individuals
6. 1) access to community-based medical, mental health, and rehabilitative care to maximize independence and function 2) access to housing and wrap-around case management and social services
7. 1) Coordinated or integrated assessment 2) Improved data on LTSS that can be assessed by the public 3) Improved housing including supportive housing to keep people in the community
8. 1- Seamless intake and assessment for entry to and eligibility for LTSS 2 - Explore all departments delivering LTSS and explore creating a Department of LTSS. 3- assess the role of Department of Aging as a key policy driver in the development of a more seamless LTSS service delivery system.
9. employment for the people able and willing to be in competitive settings and supports, programs, and services for those not able or those not willing to work in a comp. environment,
10. I would suggest one unifying theme with three underpinning policy areas, a theme of sorts e.g. "No Wrong Door" or LTSS Integration and identify three significant policies under that umbrella. For example, with no wrong door we could look at AAA information lines, Aging and Disability Resource Centers, Caregiver Resource Centers and other 800#s etc. and reduce duplication, redundancies and inefficiencies and build new technologies and efficiencies.

**Q6.** What are the top three policy recommendations you would like the Olmstead Committee to make to the new administration?

1. We need more Housing, more Transportation and more Emergency Preparedness and Response constantly!
2. Respondent skipped this question
3. affordable housing high quality health care nutrition
4. (in no order): work to find innovative ways to increase housing (in different models and configurations) for people with disabilities, mental health needs and seniors - especially people with developmental disabilities. Employment: continue efforts to implement creative and innovative ways to promote and actually achieve goals in competitive integrated employment - and careers, targeting different age groups. Long term services and supports: initiate and promote efforts that tie those services to person centered planning, to goals that are tied to reimbursements and rates
5. affordable housing high quality health care
6. 1) Promote initiatives that support access to supportive and affordable housing. 2) Promote initiative that support access to home and community based services, including home care and outpatient services
7. 1) support efforts to design and implement universal assessment 2) consider recommendations of the California Task Force on Family Caregiving to support the 4+million caregivers in the state inckudung continuing the task force in an existing organization (e.g. The Commission on Aging) 3) consider expanding the Assisted Living waiver
8. See 5 above.
9. fund community development of residential homes and programs for those with severe and profound developmental issues and behaviors provide funding and development for crisis programs and residential placement provide additional and funding to establish Special Treatment Programs throughout the state for people with ID/DD expanding and using the PDC model
10. Cohesive, coordinated approach to Medi-Cal Waiver renewal to ensure LTSS is prioritized and integrated. Improve consumer and caregiver navigation of the system to anticipate needs and ease ability to access information, resources, referrals. The Alzheimer's Association and AARP have an amazing, dynamic FREE community resource finder. California can/should too! Concerted planning for an aging population using CHIS and other resources, DOF, LAO, to embark on a master plan for the future.