

COUNTY OF SANTA CRUZ

HEALTH SERVICES AGENCY

P.O. BOX 962, 1080 EMELINE AVENUE SANTA CRUZ, CA 95061 (408) 454-4066 FAX: (408) 454-4770 TDD: (408) 454-4123

AGENDA: March 21, 2000

0139

February 21, 2000

Board of Supervisors County of Santa Cruz 701 Ocean Street Santa Cruz, CA 95060

RE: APPROVAL OF PLANNING GRANT APPLICATION FOR LONG TERM CARE INTEGRATION PROJECT

Dear Board Members:

Background:

In 1999 your Board approved a \$50,000 planning grant application for the Long Term Care Integration Pilot Project. The County was awarded the grant and, during the last year, has conducted a community planning process for Long Term Care Integration. The LTCI Task Force, Steering Committee, Service Design Team, Finance & Data Team, and Governance Team have been hard at work in this planning phase. The process has engendered broad community participation and support. Representatives from the Health Services Agency, Human Resource Agency, Central Coast Alliance for Health, and a variety of health providers and advocates for seniors and disabled citizens have contributed to the planning process.

The long term care area is complex, and new models take time to develop. In addition, delays in getting financial and service data from the California Department of Health Services have prevented us from having all the necessary information to make accurate judgments about implementing the projects feasibility. Though we have developed a broad service plan, much data analysis must be done before we can accurately assess the feasibility of such a project. Therefore, to complete our planning project properly, it is recommended that the Long Term Care Integration Pilot Project should undertake a second year of planning.

Proposal:

Three years ago, the Governor signed into law a bill with funding for planning and implementation grants for local communities. The purpose of these grants is to evaluate the options for an integrated health, long term care, housing, and social support system for local communities. The State Department of Health Services has released a request for proposals for this grant funding. Those entities that have received a planning grant in the past are eligible to apply for a second grant to complete the planning process. The grant applications are due in Sacramento on March 1st and require a new letter of support from the Board of Supervisors.

The Health Services Agency in collaboration with various members of the steering committee has developed the planning grant for submission. The Board letter of support can be transmitted this week to be included in the grant application. The grant provides a \$50,000 cash grant with a requirement for \$10,000 of local match, which is included in the HSA budget. The Health Services Agency will provide the required. matching funds from existing budgets and in-kind support services. Most of the in-kind contribution will be in the form of clerical support and assistance with data analysis and community planning meetings. If approved, the grant will begin July 1, 2000 and be complete by June 30, 2001.

It is, therefore, RECOMMENDED that your Board:

- 1. Approve the submission by the Health Services Agency of the long term care planning grant to include funds identified as match in the budget; and
- 2. Submit a letter of support for the grant to the State Department of Health Services, Office of Long Term Care.

Sincerely.

Rama Khalsa, Ph.D.

Health Services Administrator

RECOMMENDED

Susan A. Mauriello

County Administrative Officer

cc: County Administrative Officer

Auditor Controller

County Counsel

HSA Administration

Community Mental Health Administration

HRA Administration

Alan McKay, Central Coast Alliance for Health



County of Santa Cruz

HEALTH SERVICES AGENCY

1080 **EMELINE** AVENUE SANTA CRUZ, CA 95060 0141 (831) 454-5015 FAX: (831) **454-4770** TDD: (831) 454-4123

Long Term Care Integration Pilot Project

February 29, 2000

Application Coordinator Office of Long Term Care Department of Health Services 1800 Third Street, Suite 205 Sacramento,-CA 958 14

Subject: Submission of Long Term Care Integration Planning Grant Application from the County of Santa Cruz

Dear Application Coordinator:

I am pleased to submit this application for a planning grant from Santa Cruz County. Long Term Care Integration has been part of the local health and social services agenda for several years. Through the collaborative work of our Task Force, the planning grant we received last year enabled us to formalize the planning process for Long Term Care Integration.

The enclosed proposal outlines a strategy for finishing our planning process. The goal of the planning grant is to complete analysis of the feasibility of local implementation, with the intention of preparing to move into the development phase.

The Board of Supervisors' letter will be transmitted to you on March 28^{th} after the Board takes formal action on this proposal. The Board of Supervisors has approved other applications for grant funds to work on Long Term Care Integration. We anticipate that this application will meet with strong support and that the required letter will be transmitted after the Board meets.

If you have any questions, please call Suzanne Koebler, Project Manager (831-454-5015), who is coordinating this grant application for our Agency.

Sincerely,

Rama K. Khalsa, Ph.D.

Health Services Agency Administrator

Ra Kholen Pr.D.

CC: Local Steering Committee and Organizing Group County Administrative Officer

Mission: The Long Term Care Integration Pilot Project will create a financially sound system of services offering broad choice, good quality, and easy access for people in Santa Cruz County who need long-

Santa Cruz Long Term Care Integration Pilot Project Cover Sheet

0142

Applicant Name: Santa Cruz County Health Services Agency

Grant Term: 7/1/00 - 6/30/01

Contact Person: Suzanne Koebler, Project Manager

Mailing Address: 1080 Emeline Avenue, 2nd Floor

Santa Cruz, CA 95060

Email Address: olsonkoebler@hotmail.com

Telephone Number: (83 1) 454-5015

Fax Number: (83 1) 454-4770

Project Director's Name: Rama K. Khalsa, Ph.D.

Title: Administrator, Health Services Agency

Address: 1080 Emeline Avenue

Santa Cruz, CA 95060

Email Address: khalsar@health.co.santa-cruz.ca.us

Phone Number: (83 1) 454-4474

Fax Number: (83 1) 454-4770

Geographic Area to be served: County of Santa Cruz

Signature of person authorized to submit the application

TABLE OF CONTENTS

[.	Techi	nical Proposal Section	1
	A.	Identification of the Local Organizing Group	1
	1.	Organizational chart of the Local Organizing Group	.4
	2.	Proof of Nonprofit Status	5
	3.	Letter of Support and Commitment of the Board of Supervisors	. 5
	4.	Duty Statement for the Project Director	8
	5.	Job Description for the Project Manager	9
	В.	Broad Vision Statement	10
	C.	Current Status	13
	D.	Consumer and Provider Involvement.	16
	E.	Overall Goals & Objectives	18
	F.	Scope of Work	21
	G	. Gantt Chart	28
	H	. Activities Completed in First Planning Grant Period	.3 2
IJ	l. Bud	lget Section	37
	A.	Budget Narrative	37
	В.	Planning Grant Budget	38
	C.	LOG's Required 20% Match	.39

I. Technical Proposal Section

A. Identification of the Local Organizing Group

Applicant Agency

The County of Santa Cruz Health Services Agency (HSA) is the applicant and local organizing group (LOG) responsible to develop a long-term care plan and determine the feasibility of implementing a Long Term Care Integration Pilot Project (LTCIPP).

Organizational structure of the LOG

HS A is a publicly funded County department that is the umbrella organization for various health and human services programs serving low-income and disadvantaged residents. HSA oversees the major health and behavioral health programs provided through the County, including two Federally Qualified Health Centers providing primary care, a special health project for homeless persons, Public Health and Environmental Health, Emergency Medical Services, and the County Mental Health and Alcohol and Drug Abuse programs. The administrator for the Health Services Agency also serves on the Board of Directors on the County Organized Health System, which is the Medi-Cal managed care entity for acute, primary care, and skilled nursing care for the county. Dr. Rama Khalsa, Ph.D., the HSA Administrator, reports to the County Administrative Officer and receives policy direction from the Board of Supervisors. The role of HSA as applicant agency is to provide leadership in the design of a long-term care integration plan. Its responsibilities include developing the grant application, administering grant and matching funds, supervising project staff, and providing office and meeting space, supplies, and support.

The Role of the Task Force and Steering Committee

The Task Force and the Steering Committee will continue to oversee the implementation of the planning grant. The Task Force provides a forum for broad community input and education. The

Steering Committee will direct the continued work of the three Design Teams, and receive direct consumer feedback via the Consumer Leadership Group.

The Role of the Board of Supervisors

The Board of Supervisors provides policy direction to the Administrator of the Health Services Agency, the applicant agency. In addition, the Board established the Long Term Care Integration Pilot Project Task Force in 1996, and stays informed of the Task Force's progress by regular updates from the Health Services Agency Director. In addition, the Board receives direct consumer and provider input on the project through participation and reports of various commissions, including the Long Term Care Interagency Commission.

Relationships with other local agencies and advisory committees

HSA works in close coordination with the Human Resources Agency (HRA), the County agency that operates Adult Protective Services, In-Home Support Services (IHSS), Public Guardian, CalWorks, Child Protective Services, and the general assistance program. HRA also funds an extensive array of social support services for elderly and disabled adults. Together, HRA and HSA work closely with the Long Term Care Integration Pilot Project (LTCIPP) Task Force, established by the Board of Supervisors in 1996 in response to state legislation. Over one hundred members of the Task Force represent a broad spectrum of interested and committed partners: consumers, advocates, providers, legislators, Board of Supervisor staff, hospitals, nursing homes, Area Agency on Aging, Seniors' Council, the IHHS Advisory Committee, and the Long Term Care Interagency Commission. The Task Force established a Steering Committee to help guide the development of a long-term care integration pilot project.

Staff composition as it relates to the LOG

The project director is authorized to enter into the agreement with the State and has ultimate responsibility for the grant project. Dr. Rama Khalsa, Ph.D., will serve as project director. A description of duties for this role is shown on a subsequent page.

The project manager of the LTCIPP, Suzanne Koebler, will continue handling daily operations on a consulting contract with grant funds. Ms. Koebler will report to HSA and receive on-going direction by Rama Khalsa, Ph.D. Secretarial support for the project will be provided through the Health Services Agency. The project manager will continue to work closely with the LTCIPP Task Force and Steering Committee to carry out goals and objectives of the project and perform on-going planning tasks. The project manager will support work groups in completing the necessary planning and analysis to implement a LTCIPP. A job description for this position is shown on a subsequent page.

Rama Khalsa, Health Services Agency Administrator and Co-Chair of the Task Force;

Majel Jordan, Director of the Elderday Adult Day Health Center and Co-Chair of the Task Force;

Cecelia Espinola, Administrator, Human Resources Agency; Jodie Harris, Administrative

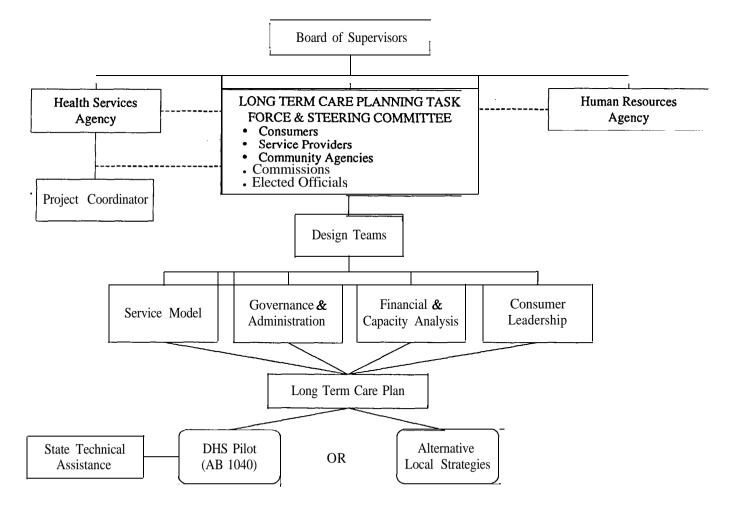
Analyst, Adult, Family & Children's Services, Human Resource Agency; Michael Molesky,

Consumer Representative; Alan McKay, Executive Director, Central Coast Alliance for Health;

and Marion Wood, Consumer Representative, will continue active participation on the Steering

Committee (along with other consumers and providers) to facilitate collaboration and minimize administrative barriers to the development of a LTCIPP.

Santa Cruz County Long Term Care Integration Planning Organization



Additional Requirements, continued

Proof of Nonprofit Status If Applicable

Santa Cruz County HSA is an arm of local county government and therefore eligible to bid in response to the RFP.

Letter of Support and Commitment of the Board of Supervisors

The Board of Supervisors initially authorized planning activities to develop a LTCIPP in 1996. Last year, the Board authorized application and participation in the planning grant activities. A letter requesting support and commitment follows this page. The Board will not be able to take action on this letter until March 28th due to the lead-time required for getting on the calendar. A certified copy of the Board letter of support will be sent to DHS to be included in this funding application after the Board takes action.

February 21, 2000

Board of Supervisors County of Santa Cruz 701 Ocean Street Santa Cruz, CA 95060

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Dear Board Members:

Background:

In 1999 your Board approved a \$50,000 planning grant application for the Long Term Care Integration Pilot Project. We received that \$50,000 award, and have used it over the last several months to conduct a community planning process for Long Term Care Integration. The LTCI Task Force, Steering Committee, Service Design Team, Finance & Data Team, and Governance Team have been hard at work in this planning phase. The process has engendered broad community participation and support. Representatives from the Health Services Agency, Human Resource Agency, the Central Coast Alliance for Health, and a variety of health providers and advocates for seniors and disabled citizens have contributed to the planning process.

As you know, community processes take time. Though we have developed a broad service plan, much data analysis must be done before we can accurately assess the feasibility of such a project. Therefore, we feel that to complete our planning project properly, the Long Term Care Integration Pilot Project should undertake a second year of planning.

Proposal:

Three years ago, the Governor signed into law a bill with funding for planning and implementation grants for local communities. The purpose of these grants is to evaluate the options for an integrated health, long term care, housing, **and social** support system for local communities. The State Department of Health Services has released a request for proposals for this grant funding. Those entities that have received a planning grant in the past are eligible to apply for a second grant to complete the planning process. The grant applications are due in Sacramento on March 1st and require a new letter of support from the Board of Supervisors.

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Health Services Agency will provide the required matching funds from existing budgets 0 150 and in-kind support services. Most of the in-kind contribution will be in the form of clerical support and assistance with data analysis and community planning meetings. If approved, the grant will begin July 1, 2000 and be complete by June 30th, 2001.

Recommendations:

It is, therefore, RECOMMENDED that your Board take the following actions:

- 1. Approve the submission by the Health Services Agency of the long term care planning grant to include funds identified as match in the budget; and
- 2. Submit a letter of support for the grant to the State Department of Health Services, Office of Long Term Care.

Sincerely,

(copy)
Rama Khalsa, Ph.D.
Health Services Administrator

CM:PS:ep Attachments

RECOMMENDED

Susan Mauriello

Susan Mauriello County Administrative Officer

cc: County Administrative Officer

Auditor Controller County Counsel HSA Administration

Community Mental Health Administration

HRA Administration

Alan McKay, Central Coast Alliance for Health

Attachment

Duty Statement for the Project Director

Position Title: Project Director, LTCIPP

Direct reports: Project Manager

Responsibilities:

• Enters into grant agreement with the state and bears ultimate responsibility for grant process

- . Oversees work of Project Manager
- . Facilitates Steering Committee & Task Force Meetings
- . Participates actively in Governance Design Team
- . Provides leadership to Finance & Data Design Team
- Supports project manager in working with consultants
- . Seeks additional funding for support of long-term care integration
- . Holds strategic meetings to facilitate cooperation and minimize administrative barriers to integration
- Presents LTCI plan to Board of Supervisors, service providers, and possible governing bodies
- . Reviews health policy, data and **risk** analysis prepared by consultants
- . Reviews design reports of the Design Teams
- . Reviews grant application for development phase

The Administrator of the Health Services Agency has been designated to fulfill this role.

Project Manager, LTCIPP

Reports to: Project Director

Direct reports: Administrative support staff

Responsibilities:

Acts as liaison to Department of Health Services

➤ Participate in Statewide meetings & workgroups, reports back to Task Force

> Prepares progress and final reports

Coordinates/supports Task Force and Steering Committee activities

- Coordinates/ supports Design Team activities
- Acts as staff to the Task Force Teams to:
 - 9 complete financial & capacity analysis
 - 9 establish consumer leadership group & schedule meetings
 - 9 gather & incorporate community input into draft service design
 - 9 finalize service model design prepare presentations of plan for Board of Supervisors, service providers, and possible governing bodies
 - 9 finalize governance & administrative design
 - 9 gain experience in high level coordination
 - > work in conjunction with DHS to identify waiver requirements
 - facilitate communication among teams, including preparing design reports
 for Steering Committee & Task Force
- Coordinates health policy, data and risk analysis with consultants
- Prepares grant application for development phase

Requirements: Master's degree plus 3-5 years administrative and planning experience in a health care setting. Understanding of LTCIPP work to date required. Program experience serving elders or disabled adults, and bilingual Spanish/ English preferred.

Special skills: Ability to relate to consumers, advocates, providers, and administrators; good verbal and written communications skills; good analytical skills; computer literate; ability to set priorities and goals and to coordinate multiple tasks.

B. Broad Vision Statement

The County of Santa Cruz is submitting this request for funding to complete its planning process aimed at consolidating acute and long-term care services for Medi-Cal and Medicare eligible aged and disabled adults. Our goal is to create a seamless and integrated acute and longterm care system that offers broad choice, good quality, and easy access to people in Santa Cruz County who need long term care. We envision a system that has the following characteristics: (1) Provides full continuum services, including medical, social, and support services, on a capitated at-risk basis to the target population (2) Engages consumers in development of a service continuum and their service plans. (3) Educates consumers, families, caregivers, and the community about long term care (4) Supports family members and caregivers to actively participate in caring for their loved ones. (5) Offers a range of adult residential, community support, and independent living options. (6) Provides high quality community programs that support an individual's highest level of functioning. (7) Links individuals and their caregivers to health and social services. (8) Consolidates financial management authority to maximize resources, minimize cost shifting, and create a single point of accountability. (9) Addresses institutional barriers to seamless care delivery. (10) Eliminates or minimizes duplication and fragmentation of services. (11) Creates incentives for use of the lowest level of care needed. (12) Measures outcomes of care and educates providers on best practices.

Special Needs and Characteristics of the Targeted Population: The target population for the LTCIPP in Santa Cruz County is Medi-Cal and Medicare eligible elders and disabled adults, age 18 and above. There are approximately 40,000 eligible elders and 5,400 adults with disabilities residing in Santa Cruz County. Each population has unique needs related to their age, disability level, income, and functional ability. Both populations may need on-going medical, housing, and social support services to manage their illnesses over time. Many of these individuals have

not had good access to ongoing primary care and case management. Consequently, they have health needs related to poor health management.

Research and community input during the first phase of LTCIP planning in Santa Cruz County furthered the community's commitment to full LTCI. Through a series of interviews, focus groups, and meetings with consumers and care providers, the community developed a better understanding of the strengths and weaknesses of its current long-term care system.

Several local strengths underscored the community's readiness to undertake LTCI. First, Santa Cruz has a history of service providers cooperating to create better experiences for clients; the Human Care Alliance, the CalWorks "One-stop" program, and the New Options TBI Consortium all demonstrate ways in which successful collaboration has led to improved care. Second, individual interviews demonstrated that through its County Organized Health System, Santa Cruz has had a positive experience with managed care. Santa Cruz County residents and service providers understand first-hand the benefits of a locally controlled, capitated system. The County Organized Health System's theme that quality health care is cost-effective translates easily to LTCI. Finally, the well-developed array of services in the County forms the basis for developing an integrated system of care. The great efforts to which each of these service providers goes to meet client needs underscores the community's commitment to serving this population. Representatives from each of the following services have participated in the Service Design Team planning process:

Existing Services

Acute inpatient HICAP insurance • Grey Bears - brown • Stroke Center hospitals X 3 Assistance bag food program Community Rehab Program - Elders Adult Day Health Hospice Care **ICF** Intermediate Ombudsman Center Care Facilities Program Adult Day Care Para-Transit - Lift SNF Skilled Nursing Veterans Services Center Line **Facilities**

• ,	Adult Protective Services	•	Independent Living Center	•	Traumatic Brain Injury Project	•	Technol Dependent Advocacy Org.
• (Caregiver Resource Center	•	Information and Referral	•	Home Health Agencies x3	• .	Senior Citizens Legal Services
•	Alzheimer's Association	•	Linkages Program	•	County Mental Health – Older Adults Services	•	Doreen Center Services for the Blind
•	Central Coast Alliance for Health- Media-Cal Managed Care	•	Multipurpose Senior Services Program (MSSP)	•	Public Guardian	•	Dining Centers X 5
•	Area Agency on Aging	•	In Home Supportive Services (IHSS)	•	Federally Qualified Community Clinics x2	•	Senior Centers x7
•	Meals on Wheels	•	Senior Companion Program	•	Dientes! – Low Income Dental Services	•	Family Services – Counseling Older Adults Program

In addition to strengths that prepare us for LTCI, the planning process has underscored the community's willingness to pursue LTCI. There was consensus on several weaknesses that the community hopes to address through integration. Fragmentation and duplication, particularly in care management, create pitfalls and obstacles for consumers trying to access services. Lack of independent and supported housing for people in need of long term care is an on-going crisis. The challenges of transportation, complex staffing issues, and the lack of respite services are major concerns. Another reason the community wishes to pursue LTCI is to better address the needs of special populations; for example, there is a great need to address issues for people with Organic Brain Syndrome comprehensively. Other constraints that were identified result from barriers created by categorical funding of acute and long-term care. These include different eligibility criteria; administratively complex funding mechanisms; and an over-reliance on institutional care. A consumer in one of the focus groups summarized the problem as follows: "There are a lot of programs and services out there, but if you don't find where you fit, you can't get what you need."

C. Current Status

Santa Cruz County has a long-standing commitment to meeting the needs of the population that uses long-term care services. The well-developed service array is evidence of this commitment. Santa Cruz's expansion of its independent living programs, day health care, and in-home care services, and the creation of its County Organized Health System are all examples of efforts to improve health and social services.

Yet the need for integration of acute and l&g-term care remains. In 1996, the Board of Supervisors authorized the County to apply for a long-term care integration pilot project and in November of the same year, the Board established a Long Term Care Integration Pilot Project (LTCIPP) Task Force to oversee the planning process. The full Task Force met and approved the LTCIPP concept and established a Steering Committee that, along with the Task Force, has met continuously since 1997.

From 1997 through June of 1999, the Task Force accomplished several major initiatives. The Task Force opened a community dialogue about issues of integration. Consumers, county agencies, and provider agencies worked together to research integrated program models. The Task Force held educational conferences and engaged local and state legislators in discussions about integration. In April 1999, the full Task Force reiterated its desire to establish a LTCIPP and agreed to proceed with a planning grant application. In June of 1999, they received the planning grant.

Planning Grant Activities:

The 1999-2000 planning grant enabled the County of Santa Cruz Health Services Agency to formalize the planning process. It provided the necessary staff support and structure to organize the volunteer efforts of consumers, advocates, and providers. The planning effort thus far has

given the community the opportunity to document its vision for a locally integrated system. Key activities by month are outlined below:

- July, 1999: Recruited Project Manager. Task Force was trained on integrated models. Task Force recommended design team membership. Steering Committee held panel interviews for Project Manager. Panel recommended a candidate to the Task Force.
- August, 1999: Project Director oriented Project Manager. Task Force held meeting with presentation by State Office of Long Term Care staff. Project Manager drafted a survey tool.
- September, 1999: Steering Committee oriented Design Teams. Project Manager conducted interviews, and attended community meetings to recruit participants. Service Design Team held its first meeting to review workplan.
- October, 1999: Project Director held meetings with key community leaders. Project
 Manager continued the survey of services and design team organization. Service Design
 Team met and formed task area work groups.
- November, 1999: Project Manager completed survey, and began to conduct focus groups.

 Service Design Team leaders met with San Francisco's LTCIP Project Manager. Project

 Director hosted a breakfast with Skilled Nursing Facility administrators. Project Manager

 attended relevant community meetings, including the Latino Affairs Commission, the

 Senior's Commission, The Long Term Care Interagency Commission, the Commission on

 Disabilities and the Senior's Council. The Service Design Team met in sub-committees to

 continue work on developing their Service Design plan. Governance Design Team held its

 first meeting and developed administrative functions and "must-have" criteria.

- **December**, 1999: Project Director held meetings with representatives of important advocacy groups. Project Manager revised workplan. Project Manager worked with a Latino outreach consultant to develop input forums. Service Design Team continued work.
- January, 2000: The Case Management sub-group presented a Design Report to the Service Design Team. The Service Design Team issued a Population Phase-In Report. The Governance Design Team further refined its administrative criteria. The Project Manager prepared a mid-term progress report. Project Manager conducted community focus group.
- February, 2000: Service Design Team finalized its recommendations for Task Force.
 Finance & Data Team created an analysis plan. Project Manager conducted two community focus groups. Steering Committee reviewed draft design reports.

As of March 2000, Santa Cruz's Long Term Care Integration Pilot Project planning efforts are at a crossroads, The Service Design Team will present the results of its work on March 9th. It is widely recognized that following this presentation the work of the three design teams must converge for upcoming decisions to be made. The Steering Committee and Design Teams have requested that efforts be directed toward accelerating complex data analyses. Santa Cruz plans to spend the remainder of its grant period analyzing local information; a finance, capacity, and utilization survey will be issued in the beginning of March to gather locally available data.

Efforts during the initial planning phase laid a firm foundation for Long Term Care

Integration in Santa Cruz County. Santa Cruz has a well-designed service continuum, an articulated vision for integration, and consensus on administrative and functional criteria for a governing entity. Future efforts will be directed at gathering financial and capacity data to support this vision, and identifying the governance entity to enact it.

D. Consumer and Provider Involvement

Over 50% of the members of the Task Force are consumers and providers of care. Membership lists are included below.

Role of the Task Force in the Planning Project:

The Task Force and the Steering Committee will continue to oversee the implementation of the planning grant. The Steering Committee will direct the continued work of the three Design Teams. The Design Teams, assisted by the Project Director, will meet regularly and develop recommendations on the major goal areas of the planning grant. The design teams correspond to the following areas: Finance and Data Analysis; Governance and Administration; and, Service Design. In addition to continued consumer participation on the Design Teams, a Consumer Leadership Group will be formed to provide direction to the Steering Committee. Although consumers will still participate in Design Teams, the Leadership group is being formed to gain maximum input from consumers who may be less interested in the technical aspects of integration.

Consumer and provider involvement in the planning process to date has been exceptional. In the first six months of the planning process, participation has more than doubled. Building the Task Force was intentionally inclusive. Every Design Team meeting is open to any consumer or provider willing to attend, and great efforts have been made to invite interested consumers and providers to participate. Perhaps most noteworthy is that each Service Design Team meeting has involved greater numbers of consumers. This constant infusion of new community input has strengthened the design team's work.

The following is the Santa Cruz LTCIPP Task Force membership list:

LTCIP Task Force Members 1999- 2000

Carol Adams* Dominican Hospital Barbara Flymn** Central Coast Alliance (COHS) Ratti McFarland** Central Coast Alliance (COHS) Ratti McKay** Ratti McKay** Central Coast Alliance (COHS) Ratti McKay** Consumer Adv. Celle Moris** Consumer Adv. Celle Moris** Celle Moris** Celle Moris** Celle Moris** Central Coast Alliance (COHS) Ratti McKay** Ratti McKay** Ratti McKay** Celle Moris** Celle	Name	Agency	Name	Agency	Name	Agency
Alliance (COHS) Alliance (COHS)	Carol Adams*		Barbara Flynn*/**	•		•
Alliance (COHS) Alliance (COHS) Jay Balzer Dientesl Clinic Dientesl Clinic Linda Advocate Bergthold*** Linda Berdwitz.** Meals on Wheels Dientesl Clinic Linda Advocate Berdhold*** Meals on Wheels Dientesl Clinic Linda Redwitz.** Meals on Wheels Dientesl Clinic Marise Goetz!** Mata Cruz Hand Redwitz.** Meals on Wheels Dientesl Clinic Linda Redwitz.** Meals on Wheels Dientesl Clinic Linda Redwitz.** Meals on Wheels Dientesl Clinic Network International Referral Linda Redwitz.** Meals on Wheels Dientesl Clinic Marise Goetz!** Marise Goetz!* Mary Hangs.** Mental Health Dientesl Clinic Mary James Mand (SNP) Dientesl Clinic Mary James Mary James Mary James Mary James Mary James Dientesl Clinic Mary James Mary		·	-	Alliance (COHS)		
Don Allegri* HR Agency Jill Ginghofer* Santa Cruz Cecile Morfis*/** Consumer Adv.	Neal Adams**	Mental Health	Lynda Francis	Grey Bears	Alan McKay*/*	
Dientesi Clinic Marise Goetzi** Santa Cruz Healthcare Center Community Hospital	Gail Alderman**	Caregiver Res. Ctr	Lisa Gifford*	Prime Health	Kathy Milam**	Meals on Wheels
Linda Berkowitz** Lisa Berkowitz** Lisa Berkowitz** Lisa Berkowitz** Meals on Wheels Stroke Center Jodie Harris** Wayne Boss SC Medical Clinic Kerry Heaps** Charles Bruffy** Pacific Coast Manor (SNF) Jon Brunelle** Consumer Adv. Scott Bugenta** Jifflingo Hithcare Anne Candia Caroly Bronz Bruns	Don Allegri**	HR Agency	Jill Ginghofer**	Alzheimer's Assoc	Michael Molesky*/**	Consumer Adv.
Bergfhold*** Meals on Wheels Randy Chelsea** SC Aids Project Ken Nakamura** Consumer Adv.	Jay Balzer	Dientes! Clinic	Marise Goetzi**		Cecile Morris*/**	
Carolyn Isberg** Stroke Center Wayne Boss SC Medical Clinic Kerry Heaps**/* Ombudsman Advocates Manor (SNF) Pacific Coast Manor Pacific Paci		Advocate	Pam Goodman**		Brenda Moss**	
Wayne Boss SC Medical Clinic Kerry Heaps*/** Ombudsman Advocates Gary Peterson Consumer Adv. Charles Bruffy** Pacific Coast Manor (SNF) Tom Holland Area Agency on Aging Robert Phillips** Caregiver Resource Center Sont Brunelle** Consumer/ Adv. Jesse Houts** Consumer/ Adv. Ronald Price Consumer Adv. Sont Bugenta**I Liftline/ Paratransit Bella Hughes Mid Coast Nursing Linda Robinson** Consumer Adv. Sonior Network Senior Network Yana Jacobs** Mental Health Olivia Quezada** Independent Liv. Ctr. Pat Byrns Driftwood Hilthcare Mary James Housing Authority Renee Robison** MSSP Anne Candia Ca Sr. Legislature Kathleen Jordan*** Elderday Michelle Shippen HR Agency Meg Corman Central Coast Alliance (COHS) Rama Khalsa**** Health Services Barry Schneider Watsonville Res Ruth Cuzik Driftwood Kathleen King Pajaro Valley JoAnn Siemsen*** Hospica Caring Project Raren Delaney Volunteer Center	Lisa Berkowitz **	Meals on Wheels	Randy Chelsea**	SC Aids Project	Ken Nakamura**	Consumer Adv.
Charles Bruffy** Pacific Coast Manor (SNF) Jon Brunelle** Consumer/ Adv. Scott Bugenta**I Liftline/ Paratransit Bonnie Burms Senior Network Yana Jacobs** Manor (SNF) Jon Brunelle** Consumer/ Adv. Scott Bugenta**I Liftline/ Paratransit Bonnie Burms Senior Network Yana Jacobs** Montal Health Olivia Quezada** Independent Liv. Ctr. Pat Byrms Driftwood Hilthcare Anne Candia Ca Sr. Legislature Ruben Chavez Health Services Majel Jordan*/* Elderday Michelle Shippen HR Agency Meg Corman Alliance (COHS) Nancy Crowley** Consumer Advocate Ruth Cuzik Driftwood Healthcare Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Metro/ Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Consumer Advocate Ruth General Palar Volunteer Ctr. John Sc Consumer Advocate Palar Volunteer Center Deborah Lane** Consumer/ Adv. Elizabeth Sparks** Independent Liv. Ctr. Lucille Des Jardins Volunteer Center Deborah Lane** Consumer/ Adv. Elizabeth Sparks** Independent Liv. Ctr. Lucille Des Jardins Palar Ruth General Physician's Medical Group Sam Storey*/** Food & Nutrition Kelly Duffin Dominican Acute Rehab Loewnstein** Jeanne Maclaren** Dominican Rehab George Wolfe Health Services Agency Consumer Adv. Vicki West** Dominican Acute Rehab Health Services Agency Consumer Adv. Consume	Carolyn Isberg**	Stroke Center	Jodie Harris**	HR Agency	Francie Newfield**	Aegis/ Assist. Liv
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Bonnie Burns Senior Network Pana Jacobs** Mental Health Olivia Quezada** Independent Liv. Ctr. Pat Byrns Driftwood Hithcare Anne Candia Ca Sr. Legislature Kathleen Johnson** Ombudsman Adv. Paul Sanford Volunteer Ctr. Puben Chavez Health Services Majel Jordan*/** Elderday Michelle Shippen HR Agency Watsonville Reg Corman Hall** Alliance (COHS) Rama Khalsa*/** Health Services Barry Schneider Watsonville Reg Care Consumer Advocate Paul Flance Community Hospital Mental Health Services Project Paul Flance Community Hospital Community Hospital Paul Flance Comsumer Advocate Palaro Valley Health Dorothy Simmers** Consumer Advocate Phase Project Physician's Medical Group Physician's Medical Group Physician's Medical Group Dominican Hospital Loewenstein** Jeanne Maclaren** Dominican Rehab Project Center Physician's Medical Consumer Advocate Palaro Project Center Physician's Medical Group Dominican Acute Rehab Project Center Physician's Medical Consumer Advocate Physician's Medical Consumer Advocate Physician's Medical Group Dominican Acute Rehab Project Center Physician's Medical Consumer Advocate Physician Rehab Physician Reha	Jon Brunelle**	Consumer/Adv.	Jesse Houts**	Consumer/ Adv.	Ronald Price	Consumer Adv.
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*Steering Committee Member **Design Team Member	Rita Flores	Senior Outreach	BonnieMcDonald.*	Linkages		
	*Steering Commi	ttee Member		**Design Team Men	nber	

Santa Cruz Long Term Care Integration Pilot Project E. Goals & Objectives

Overall Goals & Objectives

There are seven major goals of the Santa Cruz LTCIPP: (1) Plan Oversight of Planning Completion Process; (2) Complete Financial and Data Analysis; (3) Finalize the LTCIPP Service Model Design (4) Finalize a LTCIPP Governance & Administrative Structure; (5) Review and Integrate Findings from Planning Tasks; and (6) Gain Experience in High Level Coordination (7) Finalize Development Recommendations. By the end of the grant period, our goal is to have sufficient information in the key areas listed above so that we can determine the programmatic feasibility of implementing a pilot project in 2002. The Task Force and its Steering Committee will direct the work of the three Design Teams that correspond to the following major goal areas: Service Model Design; Governance and Administration; Data and Financial Analysis. In addition, a Consumer Leadership Group will be established to provide feedback to the design process. Because these goals are interdependent, the Project Director will provide staff support to the Teams, share findings, and coordinate access to consultants. The Task Force will meet quarterly throughout the project. The Steering Committee, Design Teams, and Consumer Leadership Group will meet monthly and as needed throughout the project. Goal #I Plan Oversight of Planning Completion Process Administrative preparation for the new grant cycle will proceed swiftly. Because many of the committees and reporting mechanisms are already in place, we expect to achieve all the elements of our first goal within the first two weeks of the grant cycle. The Steering Committee will also take this opportunity to invite feedback on the planning process to date and fine-tune operating procedures based on comments received.



Santa Cruz Long Term Care Integration Pilot Project E. Goals & Objectives

Overall Goals & Objectives

Goal #2: Complete Financial and Capacity Analysis Once planning grant mechanisms are in place, full attention will be given to answering key data questions regarding finance, capacity and utilization. The Steering Committee has indicated that in-depth analysis is high priority, and has directed staff to seek funding in addition to the planning grant for technical support. The Finance & Data team will complete inquiries involving local data, and begin analysis of state and federal data as it becomes available. The team will also proceed with several "mini-studies" designed to test assumptions regarding potential savings and reinvestment. The results of this analysis will then be used by the Service and Governance Design Teams to finalize their recommendations.

Goal #3: Finalize Service Model Design The Service Design Team will revise their model based on information from the Finance & Data team; revisions will include discussions of prioritization and phase-in. In addition, the team will address outstanding elements of service design, such as care management costs and recommended grievance procedures. Team leaders will request formal participation by members, and the model will again be taken to community forums for revision.

Goal #4: Finalize Governance & Administrative Design Once information from the Finance & Data team is available, the Sovemance & Administrative Design team can complete its analysis and finalize its recommendations. At that point, a formal

Santa Cruz Long Term Care Integration Pilot Project E. Goals & Objectives

Overall Goals & Objectives

presentation will be made to the entity(ies) that have been identified by the governance team for a role in LTCI. Following the presentation(s), the governance team will proceed with making additional recommendations, such as protocols to ensure cultural competency, information systems modifications, etc. A technical sub-committee will be developed to study the most complex operational and legal issues.

Goal #5: Analysis of Findings and Recommendations The Task Force will review and analyze recommendations from the Steering Committee, Design Teams, and feedback from the Consumer Leadership Group, and will recommend a go/no decision.

Goal #6: Gain Experience in High Level Coordination The behavioral changes required by LTCI take practice. The purpose of this goal is to draw on similar community experiences with integration, and implement strategic activities designed to familiarize the community with the challenges and rewards of LTCI.

Goal #7: Develop Final Recommendations and Summary Report The last goal of the project is to prepare a final report that presents the summary process and discussions, and presents the Task Force's final recommendations that will guide the implementation process. The final report including the revised service plan, a description of the governance and administrative structure, and the Financial feasibility report, will be submitted to DHS.





Goal Number: I	Goal: Plan Oversight of Planning Cor	Goal: Plan Oversight of Planning Completion Process												
Key Activities	Description	Measurable Outcome(s)	Methods of Evaluation											
A. Notify key stakeholders about grant award	A. Informs relevant parties of award and distributes work plan	A. Letter to Task Force, BOS, and Commissions	A. Project Director tracks status											
B. Establish protocols for grant administration	B. Creates mechanism for completion of goals	B. Written protocols	B. Project Director tracks status											
C. Schedule Task Force and Steering Committee Meetings	C. Notifies stakeholders regarding timeline for participation	C. Written schedule	C. Steering Committee co- chair tracks											
D. Schedule Design Team Meetings	D. Notifies stakeholders regarding timeline for participation	D. Written schedule	D. Steering Committee co- chair tracks											
E. Establish technical components of Design Teams	E. Mobilizes technical experts for in-depth analysis	E. Roster of technical experts.	E. Design Team leaders track status											
F. Schedule Consumer Leadership Group Meetings	F. Creates focused mechanism for consumer input	F. Notices & written schedule	F. Steering Committee co- chair tracks											
G. Identify process and schedule for preparation of monthly status reports/interim reports	G. Formalizes expectations regarding completion of objectives	G. Letter of expectations and timelines distributed to key committee chairs	G. Project Director tracks status											
H. Survey participants on opinions and recommendations on process to date	H. Promotes continuous quality improvement of planning process	H. Completed surveys and written recommendations	H. Task Force co-chair tracks status											

The grantee shall work toward achieving the following goals and will accomplish the following objectives. This shall be done by performing the specified activities and evaluating the results using the listed methods to focus on process and/or outcome.

Goal Number: II Goal: Complete Financial and Data Analysis **Key Activities** Description Measurable Outcome(s) Methods of Evaluation A. Obtain necessary funding to A. Identifies necessary resources Amount of grant funds/ local Steering Committee complete a comprehensive through grant or local input to contributions received. tracks status evaluation of local financing issues answer financing questions. 1. Complete analysis of 1. Comprehensively addresses Report on demographics, utilization Project Director tracks demographics, service relevant financial issues as and cost data. status utilization, and cost, using: data is available. • Locally available data • State HCBS & Medi-Cal data Medicare Data 2. Explores assumptions 2. Complete mini-studies Design reports on mini-studies. Design team co-chair regarding potential savings tracks status • Hospitalization & SNF and reinvestment. admission Readmission rate • Ambulance/ ER utilization 3. Summarizes pertinent financial Summary of Financial Analysis **Design** team co-chair 3. Complete financial feasibility issues. tracks status study **I**3. Creates information base for Design report on Cost Models & Design team 'co-chair I3. Research cost models and risk designing appropriate models. Risk Management tracks status management strategies C. Creates information base and Design report on Provider Payment Design team co-chair C. Complete research into provider strategies to realign incentives. tracks status payment methodologies and make \circ recommendations regarding payment



Goal Number: III	Goal: Finalize the LTCIPP Service M	Iodel Design						
Key Activities	Description	Measurable Outcome(s)	Methods of Evaluation					
A. Hold meetings with service providers who've been identified as potential candidates for integration, retooling, coordination and linkage. Request formal participation.	A. Formalizes participation of service providers. While many representatives have been participating date, this process would signify another level of agency commitment	A. Copies of Board Resolutions, etc.	A. Steering Committee co-chair tracks					
B. Finalize care management model & project costs	B. Strengthens service design and provides necessary information for Finance & Data Team	B. Design Report: Care Management & Costs	B. Service Design Team Co-Chair tracks					
C. Research and recommend grievance procedures in conjunction with Governance Design team	C. Creates mechanisms for Advocacy, an essential element of a consumer-centered care model	C. Design Report: Grievance Procedures	C. Service Design Team Co-Chair tracks					
D. Return to community input groups to present Service plan and gather feedback (e.g. Leadership Group, Commission on Disabilities, etc.)	D. Involves entire community in collaborative feedback	D. Agendas. Notes from community input forums	D. Project Manager tracks					
E. Incorporate community feedback into final version of Service Design.	E. Strengthens final model through focus on community input	E. Overall Design Report: Service Model	E. Project Director tracks					
F. Revise recommendations based on input from other Design Teams.	F. Coordinates Service Model with entire project	F. Revisions to Service Model Design Report	F. Steering Committee Co-Chair tracks					

Goal Number: IV	Goal: Finalize a LTCIPP Governance & Administrative Structure										
Key Activities	Description	Measurable Outcome(s)	Methods of Evaluation								
A. Develop and take formal LTCIP presentation to those who have been identified by governance team as potentially having a role in LTCIP	A. Creates buy-in and formalizes request for high-level participation.	A. Slides, handouts, minutes.	A. Project Director tracks status								
B. Make recommendations regarding board requirements and appointment process	B. Creates mechanism for assuring representation of consumers, providers, and other stakeholders.	B. Design Report: Board Composition	B. Design Team Leader tracks status								
 C. Develop technical sub-committee to study and report on the most complex operational and legal issues, including: Grievance procedures Ensuring cultural competency Continuous quality improvement Review of financial risk analysis Recommend information systems Modifications 	C. Allows key issues to be explored by technical experts, and brought back to the committee for discussion.	C. Design Reports: Operation and Legal Issues, committee notes	C. Design Team Leader tracks status								
). Identify entity(ies) responsible for governance and administration	D. Completes crucial task for overall planning effort.	D. Resolutions(s) by governing Board, including Board of Supervisors	D. Steering Committee Co-Chair Tracks								



Goal Number: V	Goal: Review and Integrate Findings from Planning Tasks										
Key Activities	Description	Measurable Outcome(s)	Methods of Evaluation								
A. Hold retreat for design teams to present findings and recommendations. Discuss areas of concern.	A. Provides necessary forum to exchange reports.	A. Announcements, meeting notes, attendance list	A. Project Director tracks status								
B. Consolidate design team recommendations into master report to be distributed to entire task force, commissions, and community input groups.	B. Consolidates findings and provides mechanism for disseminating information.	B. Overall Design Team Report	B. Project Manager tracks status								
C. Gather final feedback from Consumer Leadership Group, commissions, and other community input groups.	C. Provides opportunity for broad community input.	C. Meeting notes, letters from individuals	C. Project Manager Tracks status								
D. Summarize feedback from various community input sources.	D. Provides input to guide design teams in final revision phase.	D. Design Report: Summary of Consumer Feedback	D. Steering Committee Co-Chair tracks status								
			0168								

Goal Number: VI	Goal: Gain Experience in High Level	Coordination	
Key Activities	Description	Measurable Outcome(s)	Methods of Evaluation
 A. Study existing community models of successful program integration and coordination "One-S top"/ Careerworks Center New Options TBI Consortium HIV Consortium Central Coast Alliance for Health "ABC" Children's Program 	A. Allows community to utilize experience of innovative community programs that have improved consumer's experience of systems.	A. Design Report(s): Successful Models of Collaboration	A. Steering Committee Co-Chair Tracks Status
 B. Begin implementation of strategic activities that will prepare community for LTCIP Shared Release of Information Shared Intake Form Etc. 	B. Prepares community of long-term care providers for LTCIP by "practicing" necessary collaboration skills incrementally.	B. Notes on process, shared products	B. Steering Committee Co-Chair Tracks Status
• Etc.			
			0169

Goal Number: VII	Goal: Finalize Development Recommendations												
Key Activities	Description	Measurable Outcome(s)	Methods of Evaluation										
A. Prepare report summarizing planning process.	A. Provides overview of entire planning process. Offers guidance to other communities embarking on similar planning process.	A. Written report	A. Task Force Co-Chair tracks status										
 B. Prepare report summarizing recommendations. The report will include findings and recommendations from: Finance & Data Design Team Service Design Team Governance Design Team Consumer Leadership Group Study of Existing Community Models Steering Committee Task Force (Go/ No-go decision) 	B. Provides summary of recommendations and vehicle for community distribution of recommendations.	B. Written report	B. Task Force Co-Chair tracks status										
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Santa Cruz Long Term Care Integration Pilot Project G. Gantt Chart

Task Name	Start	Finish		2000 200						001	1			
	}	,	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
I. Plan oversight of planning completion	7/1/00	7/15/00						i						
process					.		<u> </u>							
A. Notify key stakeholders about grant award	7/1/00	7/15/00												
B. Schedule Task Force and Steering	7/1/00	7/15/00				,						ļ		
Committee Meetings														
C. Schedule Desien Team Meetings	7/1/00	7/15/00_												
D. Establish technical components of Design	7/1/00	7/15/00												
Teams		Į												
E. Schedule Consumer Leadership Meetings	7/1/00	7/15/00												
F. Identify process and schedule for	7/1/00	7/15/00												
preparation of monthly status/interim	Į													
reports								_						
II. Complete Financial and Data Analysis	7/1/00	12/31/00					,							
A. Obtain funding to complete comprehensive	7/1/00	8/31/00						`						
evaluation of local financing issues														
B. Complete analysis of demographics,	7/1/00	12/31/00												
service utilization and cost, using:														
Locally available data	7/1/00	9/30/00												
State HCBS & Medi-Cal data	7/1/00	10/31/00												
Medicare Data	10/1/00	12/31/00												
C. Complete mini-studies	7/1/00	12/31/00												
Hospitalization & SNF admissions	7/1/00	12/31/00												
Readmission rate	7/1/00	12/31/00												
Ambulance/ ER utilization	7/1/00	12/31/00												
Housing alternatives/ occupancy	7/1/00	12/31/00										-		
D. Comnlete financial feasibility study	7/1/00	12/3 1/00												
E. Research cost models & risk management	7/1/00	12/31/00												





Santa Cruz Long Term Care Integration Pilot Project G. Gantt Chart

Task Name	Start	Finish	ļ	•	2	000			2001						
			July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
F. Complete research into provider payment methodologies & make recommendations	7/1/00	12/31/00													
III. Finalize the LTCIPP Service Model Design	7/1/00	1/31/00											•		
A. Hold meeting with service providers to request formal participation	7/1/00	9/30/00													
B. Finalize care management model & project costs	7/1/00	10/31/00								···					
C. Research and recommend grievance procedures in conjunction with Governance Design Team	7/1/00	8/31/00													
D. Return to community input groups for feedback	9/1/00	10/31/00													
E. Incorporate community feedback into revision of Service Design	11/1/00	11/30/00						٠							
F. Revise recommendations based on input from other Design Teams	12/1/00	1/31/01													
IV. Finalize an LTCIPP Governance & Administrative Structure	7/1/00	2/15/00				<i></i>									
A. Develop and take a formal LTCIP presentation to groups identified by Governance Design Team as having a role in LTCIP	7/1/00	9/30/00													
B. Make recommendations regarding board requirements and grievance procedures	9/1/00	11/30/00											•		

Santa Cruz Long Term Care Integration Pilot Project G. Gantt Chart

Task Name	start	G. Gan Finish	tt CII	u1 t		2000					20	2001			
		<u> </u>	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
C. Develop technical sub-committee to study	7/1/00	1/31/01													
and report on complex issues, including:															
Grievance procedures	7/1/00	8/31/00													
Ensuring cultural competency	8/1/00	9/30/00													
 Continuous quality improvement 	9/1/00	10/31/00													
Review of financial risk analysis	1/1/01	1/31/01													
Recommend information systems	11/1/00	1/31/00													
modifications		 													
D. Identify entity(ies) responsible for	7/1/00	2/28/00													
governance and administration					í -									ļ	
V. Review and integrate findings from	12/1/00	2/15/01													
planning tasks				_		<u> </u>									
A. Hold retreat for design teams to present	1/10/01	1/20/01													
findings and collaborate on															
recommendations	1/00/01	0/15/01				-	-	1					_		
B. Consolidate recommendations into master	1/20/01	2/15/01													
report C. Gather final feedback from Consumer	2/15/01	3/30/01								İ		· ·			
Leadership Group, commissions, and other	2/13/01	3/30/01													
community input groups							}								
D. Summarize feedback from various	3/1/01	4/1/01				ļ	 			_					
community input sources	0,1,01	., 1, 01					1								
VI. Gain experience in high level coordination	1/1/01	6/30/01			-										
A. Study existing community models of	1/1/01	6/30/01			-										
successful integration and coordination															
"One-Stop"/ Careerworks Center	1/1/01	6/30/01													
New Options TBI Consortium	1/1/01	6/30/01													
HIV Consortium	1/1/01	6/30/01			*										





Santa Cruz Long Term Care Integration Pilot Project

G. Gantt Chart

G. Gantt Chart														
Task Name	Start	Finish	2000						2001					
			July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Central Coast Alliance for Health	1/1/01	6/30/01												
• "ABC" Children's Program	1/1/01	6/30/01												
B. Begin implementation of strategic activities	3/1/01	6/30/0 1												
that will prepare community for LTCIP							<u> </u>							
Shared Release of Information	3/1/01	6/30/0	1		1									
Shared Intake Form	3/1/01	6/30/0	1											
VII. Finalize Development Recommendations	2/1/00	6/30/01												
A. Prepare report summarizing planning	2/1/00	5/31/00					į							
process						j	<u> </u>							
B. Prepare report summarizing	2/1/00	6/30/00							1					
recommendations. This report will include								ļ						
findings and recommendations from:														
Finance & Data Design Team	2/1/00	6/30/00												
Service Design Team	2/1/00	6/30/00												
Governance Design Team	2/1/00	6/30/00												
Consumer Leadershin Group	2/1/00	6/30/00			•									
Steering Committee	2/1/00	6/30/00						<u> </u>						
Task Force (including go/no go decision)	2/1/00	6/30/00												

Santa Cruz County's Long Term Care Integration Pilot Project has made great strides in planning for LTCI. Major accomplishments to date include: recruiting key committee co-chairs and members; orienting and guiding design teams; drafting a service model design; defining the service continuum; conducting analysis of the current long term care system; researching an appropriate LTCIPP service model that fits the needs of Santa Cruz residents; developing a care management model; defining phase-in of the target population; making recommendations for consumer input & advocacy; determining the administrative and structural supports necessary to implement a LTCIPP; developing a data survey and analysis plan; increasing community awareness, understanding, and support for LTCI; and participating actively in statewide LTCIP activities. Each of these accomplishments is described in greater detail below.

The protocols and mechanisms to plan for LTCI were quickly established. The Health Services Administration set up the grant protocols, and scheduled meetings for the Task Force and Steering Committees. The Steering Committee and Health Services Administration recruited, hired, and oriented the project director, who began work August 27th. The Steering Committee recommended and recruited design team members, gave assignments, and established a reporting schedule.

The Task Force and Steering Committee have been successful at recruiting key committee co-chairs and members. The Task Force has continued to meet quarterly, and has focused meetings on developing a common understanding of LTCI. The Task Force has almost doubled its membership since work began. Several project participants have commented that while Santa Cruz has always been a participatory community, the unique collaboration among consumers, advocates and providers in the LTCIPP thus far is truly unprecedented.

The Steering Committee worked closely with design teams to develop an understanding of project goals and objectives. Initial meetings of the design teams were scheduled, and key

chairs worked with the project manager to translate objectives into manageable questions. The Steering Committee has continued to meet monthly to oversee the project. The committee monitors the work of the various committees, and the project manager. The Steering Committee developed the project mission statement, and was instrumental in revising the project work plan. The committee has been helpful in advising the co-chairs and project director about key community contacts.

The project manager undertook a survey of local long term care services, In the first phase of this analysis, project manager designed and implemented a Service Survey to review the current system. This review included over 30 interviews with key stakeholders, developing flow charts to depict the customer's experience of the system, and compiling summary documents based on the interviews. This survey served multiple purposes. It increased interest and participation in the planning effort. In addition, it gave key leaders an opportunity to voice hopes and concerns for our efforts. It also has helped to build a case for why LTCI is vital to the community. The Service Survey is a key reference document for developing an improved care model that is cost effective and efficient. The second phase of the survey has involved developing modes of consumer input. The project director has created a consumer and caregiver protocol, and pre-tested each of those protocols. In addition, a focus group format has been developed, and three focus groups have been conducted to date. The next several months will be devoted to gaining even more consumer input.

Much of the project's work to date has focused on service design. The Service Design Team began its work in September. Sub-group leaders were identified in the areas of case management, service options, other models, and consumer advocacy. The committee developed vignettes to remind themselves and others on the task force of the need for LTCI. A schedule of meetings for the sub-committees was established.

The Service Design Team has emphasized networking with other counties and states to develop the plan. The Service Design Team Co-Chairs met with Bill Haskell of San Francisco's LTCIPP to learn about their design team processes. In addition, the group reviewed materials from the Lewin Group's study in San Mateo. Based on a variety of input, including minutes from previous meetings, San Francisco's documentation, Oregon's model, San Mateo's work, and materials from Arizona and Texas, the service options sub-committee developed a recommended service continuum.

The Service Design Team accomplished other goals, too. Team members submitted a Case Management Design Report. The report included a definition, principles, and core functions of case management, along with a diagram of consumer's experience of case management. The Service Design Team also developed recommendations for advocacy. The advocacy sub-group met and drafted a mission statement, program, and process for advocacy.

The Governance Design Team began a focused discussion of **crucial** governance issues. They developed a list of administrative functions of a LTCI entity, and a list of "must have" criteria for a governance structure. These discussions have laid the foundation for evaluating recommended governance and administrative models against these criteria. Much of the governance committee's work has involved making sure the right people are involved in the discussion.

The Finance & Data team created a survey to be sent to all providers of long-term care services. In addition, they created a plan to analyze data, which includes outlines of studies aimed at testing hypotheses around potential savings. Currently the Finance & Data team cochairs are negotiating a contract with an independent consultant who is familiar with locally available data from the County Organized Health System.



In an effort to promote cultural competency, Santa Cruz's Long Term Care Integration Project entered into a consulting agreement with Teresa Morales, Latina Media & Community Outreach Consultant. Ms. Morales has contacted a number of Latino leaders, and is in the process of designing and implementing focus groups and individual interviews specifically to obtain input on the project from the Latino community. We hope to use what Ms. Morales develops for the Latino community as a model for obtaining input from other diverse groups.

Through the Project Manager, Santa Cruz's LTCIP Steering Committee and Task Force have participated actively in state activities. The project manager attended statewide meetings and data group meetings. The project manager networked extensively with other counties, getting materials and ideas from San Francisco, San Mateo, Contra Costa, and Riverside Counties.

The Task Force Co-Chairs and Project Manager have devoted considerable time and effort to developing awareness, understanding, and support for LTCI. The Co-Chairs held individual meetings with a variety of community members to discuss LTCI. Co-Chairs established a working relationship with local Skilled Nursing Facility administrators. Other meetings held by the co-chairs included a meeting with the Pajaro Valley Community Health Trust, the new Executive Director of the Santa Cruz Aids Project, and local union representatives.

The Project Manager has capitalized on the fact that Santa Cruz is a participatory community. She presented about the LTCIPP at meetings of all the relevant county commissions, including: The Long Term Care Interagency Commission, The Commission on Disabilities, The Latino Affairs Commission, and the Human Services Commission. In addition to presenting to the commissions, she attended other community meetings, such as the New Options Traumatic Brain Injury collaborative, and the local meeting of the Senior's Council, the

governing body for the Area Agency on Aging (AAA). The Project Director was recently appointed by the Board of Supervisors to represent the Health Services Agency on the Long Term Care Interagency Commission. Through participation in this commission, the goals and progress of our project will constantly be made known to the long-term care advisory body to the Board of Supervisors. Among the recommendations the Commission made to the board in its final report for 1999 was that the Board continue to support the efforts of the Long Term Care Integration Pilot Project.

Though this outreach has been time consuming, it has been of great value to the project. There is a unified feeling among members of the Task Force and the community at large that the project has tremendous momentum. We believe this momentum will carry our efforts through the end of the planning phase and on into development of a successful Long Term Care Integration Project.

Several questions remain to be answered in the effort to create a Long Term Care

Integration Pilot Project. The last four months of this grant cycle will be used for analysis of
locally available data. Still, the analysis will not be complete. The Task Force eagerly awaits
the arrival of state and federal data to augment its understanding of long term care trends. If
successful with its application, the County of Santa Cruz Health Services Agency will use this
planning grant to lead the planning process to completion and into development. The Task Force
will direct planning and supplemental funds to answer data questions that remain. The Design
Teams will then use those answers to refine the service model design, address legal and
operational issues, and secure an entity to govern the LTCIPP.

II. Budget Section

A. Budget Narrative

0180

Explanation of Use of Grant Funds

Grant funds will be used for staff support through a consulting contract with the Project Manager. In addition, grant funds will be used for consultants to assist with program analysis.'

Description of Rewired Match

The Health Services Agency is making a **contribution** of \$10,000 which will assist with providing consultants for technical assistance to the Finance & Data Team to answer critical questions for LTCI planning.

In addition, the Health Services Agency will provide secretarial support to the Project Manager and Project Director.

Additional in-kind contributions by HSA beyond the required match include:

- support for office and meeting space
- equipment
- supplies
- printing

¹ Resumes for project staff and consultants are available upon request.

Long Term Care Integration Pilot Project Planning Grant Budget

<u>Line Item</u>	<u>Total</u>
Personnel Costs	\$0
Fringe Benefits (% of Personnel Costs)	\$0
Operating Expenses	\$0
Equipment Expenses Contractor-Procures \$0 State Procures \$0	\$0
Travel and Per Diem	\$0
Subcontracts Project Manager (1920 hours @ \$25/ hour)	\$48,000
Consultation	\$2,000
Direct Overhead Expenses	\$0
Indirect Costs (0% of Personnel Costs)	\$50,000
Total Costs	\$50,000

Long Term Care Integration Pilot Project Planning Grant Budget LOG's Required Match

<u>Line Item</u>		<u>Total</u>
Personnel Costs		\$0
Fringe Benefits (% of Perso	onnel Costs)	\$0
Operating Expenses		\$0
Equipment Expenses Contractor Procures State Procures	\$0 \$0	\$0
Travel and Per Diem		\$0
Subcontracts Linda A. Bergthold William M. Mercer Tim Riley Teresa Morales		\$10,000
Other Costs		
Direct Overhead Expenses		\$0
Direct Overhead Expenses Indirect Costs (in-kind)		\$0 \$4,000



County of Santa Cruz

HEALTH SERVICES AGENCY

1080 EMELINE AVENUE SANTA CRUZ, CA 95060 (831) 4565015 FAX: (831) 454-4770 TDD: (831) 454-4123

Long Term Care Integration Pilot Project

Memo to:

Application Coordinator, Long Term Care Integration Planning Grants

From:

- Suzanne Koebler, Project Manager, Santa Cruz LTCIPP

Re:

Community Letters of Support for LTCIP Planning Grant Application

Attached you will find eighteen letters of support from community members interested in planning for integration. The letters represent the broad spectrum of consumers, advocates, and providers who are involved in our planning process.

Mission: The Long Term Care Integration Pilot Project will create a financially sound system of services offering broad choice, good quality, and easy access for people in Santa Cruz County who need long-term care.

0184

408. 4273900 TDD 408. 426. 1964 FAX 408.427.0398

P.O. Box 557, Santa Cruz, CA 95061-0557

Santa Cruz AIDS Project Proyecto SIDA de Santa Cruz

February 14, 2000

Application Coordinator
Office of Long Term Care
Department of Health Services
PO Box 942732
Sacramento, CA 94234-7320

To Who It May Concern:

I write this letter in support of Santa CNZ County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Program Project.

Many members of **the** Santa **Cruz** community have been contemplating the vision of long term care integration for several years. The grant we received for the **past** year provided **a** mechanism that allowed us to plan for this vision. I am impressed and excited by **the** collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish the planning we have started.

Because of **the** many strengths and the pioneering spirit of the Santa **Cruz** community, I believe **we** have a unique opportunity to create a better system **that offers** good **quality**, broad choice, and easy access for people in Santa **Cruz** County who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration.

Michelle Jei

Sincerely,

Michelle Lewis Ph.D. Executive Director Santa **Cruz** AIDS Project





ADMINISTRATION 1000 Emeline Avenue Santa Cruz, CA 95060 (831) 4544130 Fax: (83 1) 454-4642

February 15, 2000

Application Coordinator Office of Long Term Care Department of Health Services P.O. Box 942732 Sacramento, CA 94234-7320

To Whom It May Concern:

I write this letter in support of Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Many members of the Santa Cruz community have been contemplating the vision of long term care integration for several years. The grant we received for the past year provided a mechanism that allowed us to plan for this vision. I am impressed and excited by the collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish the planning we have started.

Because of the many strengths and the pioneering spirit of the Santa Cruz community, I believe we have a unique opportunity to create a better system that offers good quality, broad choice, and easy access for people in Santa Cruz County who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration.

lecilia Esminola

Sincerely,

CECILIA ESPINOLA

Administrator





County of Santa Cruz

HEALTH SERVICES AGENCY

1400 EMELINE AVENUE SANTA CRUZ, CA 96060 0186 (831) 454-4170 FAX: (831) 464-4464 TDD: (831) 4644123

Community Mental Health

Application Coordinator
Office of Long Term Care
Department of Health Services
PO Box 942732
Sacramento, CA 94234-7320

February 15, 2000

To Whom It May Concern:

I write this letter in support of Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Many members of the Santa Cruz community have been contemplating the vision of long term care integration for several years. The grant we received for the past year provided a mechanism that allowed us to plan for this vision. I am impressed and excited by the collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish the planning we have started.

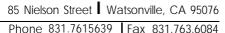
Because of the many strengths and the pioneering spirit of the Santa Cruz community, I believe we have a unique opportunity to create a better system that offers good quality, broad choice, and easy access for people in Santa Cruz County who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration:

Sincerely,

Yana Jacobs, MFT

Program Manager Adult Mental Health





February 14, 2000

Application Coordinator
Office of Long Term Care
Department of Health services
P.O. Box 942732
Sacramento, CA 94234-7320

To Whom It May Concern:

I wish to encourage your endorsement of the grant application made to you by the **Santa Cruz County Health Services Agency** in support of planning funds for the **Long Term Care Integration Pilot Project**.

Our organization has followed with interest the broad collaborative effort undertaken by local service providers, consumers and health care advocates to integrate long term care in Santa Cruz County. Access to such care is a pressing need throughout our community. While considerable progress has been made with the initial planning grant, the project cannot fully realize its goals without further support.

We applaud the project's progress to date and encourage you to grant additional planning funds to help complete this important project.

Thank you for your consideration.

Cordially,

Kathleen A. King Executive Director



Ombudsman/Advocate, Inc.

265 Water Street Santa Cruz, California 95060 (408) 429-1913, 688-8833 Fax 429-9102

0188

Rights Protection and Advocacy for the Institutionalized Elderly and Mental Health Clients

Application Coordinator Office Of Long Term Care Department of Health Services PO Box 942732 Sacramento, CA 94234-7320

February 15, 2000

To Whom It May Concern.

It is with great-pleasure that I write this letter in support of Santa **Cruz** County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Many services providers for recipients of Long Term Care have been envisioning a time when services could be delivered in a manner that provides quality treatment, ease of access, and cost effectiveness. I believe we have made excellent progress toward reaching that goal and am very excited regarding the progress Santa Cruz has made thus far. The support of the grant we received last year enabled the group to begin the necessary work that is laying the foundation for the reality of Long Term Care Integration. The cooperation and enthusiasm of this unique community is unparalleled in my experience. Several diverse and qualified members of the community have come together and spent many hours developing what I believe will be a wonderful service for our community.

Thee are several components of the plan we still need to develop further. There are still many questions that require answers and clarification. In order to accomplish our goals we will need a completion grant that will allow us to answer these questions and complete the planning we have started.

Please continue your support of this vital project so that we may complete this important process.

Sincerely,

Kerry Heaps



CENTRAL COAST ALLIANCE FOR HEALTH0189

375 Encinal Street ~ Suite A ~ Santa Cruz ~ CA ~ 95060 (831) 457-3850 ~ FAX (831) 457-3858

February 15, 2000

Application Coordinator Office of Long Term Care Department of Health Services PO Box 942732 Sacramento, CA 94234-7320

To Whom It May Concern:

Please-accept this letter in support of the Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

I have been involved with many health professionals and health care advocates over the past several years in discussing and envisioning potential changes to the way Long Term Care services are delivered in our County. Central Coast Alliance for Health is the locally managed Medi-Cal managed care health plan and we include Skilled Nursing Facility care under our State contract. We are very interested in working on this Pilot Project in order to bring about improvements to Long Term Care services in our County.

This past year through the LTCIPP initial planning grant, many stakeholders have been able to come together in an organized manner and make progress in defining the parameters of locally-integrated long term care. We have accomplished a great deal in the various design teams which have been at work this year. However, we need answers to several questions that require complex data analysis before we can proceed to implementation, and this completion planning grant outlines a logical progression of steps for our project to finish the planning phase of our work.

Because of the very effective collaborative efforts of many people in our Santa Cruz County communities, I believe we have a unique opportunity to create an improved system that is financially viable and offers good quality, broad choice, and easy access for people in need long term care. I urge you to continue your support so that we may complete this important phase of our project.

Sincerely,

Alan McKay



0190

February 14, 2000

Application Coordinator Office of Long Term Care Department of Health Services PO Box 942732 Sacramento, CA 94234-7320

To Whom It May Concern:

I write this letter in support of Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Many members of the Santa Cruz community have been contemplating the vision of long term care integration for several years. The grant we received for the past year provided a mechanism that allowed us to plan for this vision. I am impressed and excited by the collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish the planning we have started.

Because of the many strengths and pioneering spirit of the Santa Cruz community, I Believe we have a unique opportunity to create a better system that offers good quality, broad choice, and easy access for people in Santa Cruz County who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration.

Sincerely,

Isabella G. Hughes, RN, MS





County of Santa Cruz

SENIORS COMMISSION

1400 EMELINE AVE., 3rd FLOOR, SANTA CRUZ, CA 95060 (831) 4644864 FAX (831) 454-4290 PRISCILLA LOEWENSTEIN, CHAIR

0191

February 21, 2000

Application Coordinator Office of Long Term Care Department of Health Services PO Box 942732 Sacramento, CA 94234-7320

To Whom It May Concern:

The County of Santa Cruz Seniors Commission submits this letter in support of Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Over the years, many members of the Santa Cruz community contemplated the vision of long term care integration. The grant the County received for the past year provided a mechanism that allowed the community to plan to achieve this vision. The Seniors Commission is pleased with the collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. Our county needs answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish the planning we started.

Because of the many strengths of the Santa Cruz community, we have an opportunity to create a better system of long term care, which offers good quality, broad choice, and easy access for residents who need long term care. Please continue your funding support so that the community may complete this important process.

Thank you for your consideration.

Sincerely,

No alle Locevers to

Priscilla Loewenstein

Chair

PL/ewc

P. 02

FEB-24-00 11:01 AM LIFE\$PAN

8314694950

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Lifespan

Care Management Agency

Application Coordinator
Office of Long Term care
Department of Health Services
PO Box 942732
Sacramento, CA. 94234-7320

February 23, 2000

To Whom it May Concern,

This letter is written in support of the Santa Cruz County Health Services Agency's application for a completion-planning grant for the Lang Term Care Integration Pilot Project.

I, along with many members of the Santa Cruz County community, have been collaborating to plan for our vision of long term care integration. This process was allowed because of the grant received for the past year and has been very exciting and inspiring. Community representatives, consumer advocates and service providers have been hard at work and given gracefully of their time because of this common goal. Many hours have been put in end much has been accomplished in working towards a better long-term care delivery system in this community, There is also still much to do.

It is my hope that we will be able to continue our efforts. This will be possible if you decide to continue your support. We are requesting a completion grant to allow us to continue the process of data analysis to answer pressing questions so that we can go forward with implementation.

Thank you so much for your consideration of this matter,

Sincerely Yours,

Panele Soudmen Pamela Goodman RN, CMC

Resident

Lifespan Care Management Agency

Francie Newfield 5341 Glen Haven Rd. Soquel, CA 95073

0193

Application Coordinator Office of Long Term Care Department of Health Services PO **Box** 942732 Sacramento, CA 94234-7320

Febru 123, 2000

To Whom it May Concern:

I am writing this letter in support of S&a Cruz County Health Services Agency's application for a completion planning grant for Long Term Care Integration Pilot Project. 1 have worked for over 15 years in public sector long-term care programs and recently in the private Sector, in the assisted living industry. It is clear to me and my collaborating colleagues that a significant redesign of long-term care services is necessary in order to provide broad choice and easy access to resources for those in need.

As you know, the evaluation and planning for integration of long term care services is a mammoth undertaking. An impressive collaborative effort has been underway in the Santa Cruz community for several years and we are excited about the progress we have made thus far. The planning grant we received for the past year has been a tremendous tool toward developing our vision. In order to move further through our process and address the very complex data analysis issues completion grant funds are necessary.

Santa Cruz has always taken pride in it's collaborative abilities as a community. We sincerely believe that, we can design an innovative and effective system to meet the long term care needs of our community. Please continue your support of our process by recommending \$anta Cruz County Health Services Agency for a completion grant.

Thank you for considering this request.

1 (

Sincerely, Jancie Revolud

Francie New field

Member, Long-Term Care Interagency Commission

0194

Dominican Hospital 1555 Soquel Drive Santa Cruz, CA 95065 X3 I 462 7700 Telephone

Dominican Rehabilitation Services 6 IO Frederick Street Santa Cruz, CA 95062

www.dominicanhospital.org

February 14, 2000

Application Coordinator
Office of Long Term Care
Department of Health Services
PO Box 942732
Sacramento, CA 94234-7320

Dear Application Coordinator:

I am writing in support of Santa Cruz County Health Services Agency's application for a completion-planning grant for the Long Term Care Integration Pilot Project. During my affiliation with this project I have come to appreciate the scope and depth of our vision here in Santa Cruz.

Many members of the Santa Cruz community have been contemplating the vision of long term care integration for several years. The grant we received for the past year provided a mechanism that allowed us to plan for this vision. I am impressed and excited by the collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish the planning we have started.

Because of the many strengths and the pioneering spirit of the Santa Cruz community, I believe we have a unique opportunity to create a better system that offers good quality, broad choice, and easy access for people in Santa Cruz County who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration.

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Sincerely,

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Diréctor of Rehabilitation Services



CI Salinas
Central Office
234 Capitol Street
Suite A & B
Salinas, CA 9390 [
(83 I) 757-2968 Voice
(83 I) 757-3949 TDD
(83 I) 757-5549 FAX
email:cccil@cccil.org

☐ Capitola

I 395 41stAvenue
Suite B
Capitola, CA 950 IO
(83 I) 462-8720 Voice
(83 I) 462-8729 TDD
(83 I) 462-8727 FAX
email:cccilcap@cccil.org

Application Coordinator
Office of Long Term Care
Department of Health Services
PO Box 942732
Sacramento, CA 94234-7320

To Whom It May Concern:

Central Coast Center for independent Living strongly supports the application of the Santa Cruz County Health Services Agency for a completion planning grant for the Long Term Care Integration Pilot Project.

Members of CCCIL's staff and board have been participating enthusiastically in the local LTC Integration efforts so far, as part of the Steering Committee, Services Design Team and the Task Force as a whole. This is truly a community effort which is growing more inclusive as we go. People with disabilities are a part of this effort, and we are working together with the rest of the group to ensure that the needs and wants of younger people with long term care needs are included in the plan that we are creating.

Having such broad community participation also means the process takes time. We have made an excellent beginning. The many people involved have been learning the language of long term care, and have been learning each others' terminology as we build a bigger team. The Services Design Team, for instance, has already drafted our plan for the integrated services we want for Santa Cruz County.

Our dream of an integrated LTC service system that works is on its way to becoming a reality. We need to keep going and complete our planning efforts. Please fund our application for a completion planning grant.

Sincerely,

Elsa Quezada





County of Santa Cruz

HEALTH SERVICES AGENCY

0196

1400 EMELINE AVENUE SANTA CRUZ, CA 95060 (831) 454-4767 FAX: (831) 454-4663 TDD: (831) 454-4123

Community Mental Health

February 28, 2000

Application Coordinator
Office of Long Term Care
Department of Health Services
PO Box 942732
Sacramento, CA 94234-7320

To Whom It May Concern:

I am writing to support Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

As a member of the Santa Cruz community, I have been acutely aware of the urgent need for long term care integration for several years. Because of the grant received by Santa Cruz County Health Services Agency last year, substantial progress has been made towards this goal. The collaboration among consumers, advocates, and service providers has been substantial and greatly contributed to the success to date.

As you know, such planning efforts requires substantial time and the work is not yet completed. Several questions remain and complex data analysis is required before this initiative can proceed to implementation. A completion grant will provide our community with the resources necessary to finish the planning we have started.

Because of the many strengths of the Santa Cruz community, not the least of which is a commitment to collaboration, there is now a unique opportunity to create a better system. I hope that we will soon be able to provide good quality, broad choice, and easy access for people in Santa Cruz County who need long term care. I hope that you will continue to support this effort so that we may complete this important process.

Thank you for your consideration.

Sincerely

Meal Adams, MD Medical Director

F:\Dr. Neal Adams\Word Docs\Ltr Lng Trm Care Integration Pilot Prog.doc



0197

February 17,2000

Application Coordinator Office of Long Term Care **Department** of Health Services **P.O.** Box 942732 Sacramento, CA 94234-7320

To Whom it May Concern:

I write this letter in support of Santa Cruz county Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Many members of the Santa Cruz community have been contemplating the vision of long **term** care integration for several years. The grant we received for the past year provided a mechanism that allowed us to plan for this vision. I am impressed and excited by the collaboration among consumers, advocates, and service providers thus far. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. We need a completion grant that will allow us to answer these questions and finish.the planning we have started.

Because of the many strengths and the pioneering spirit of the Santa Cruz community, I believe we have a unique opportunity to create a better system that offers good quality, broad choice, and easy access for people in Santa Cruz county who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration.

Sincerely.

Alzheimer' Association of Santa Cruz





Meals on Wheels

for Santa Cruz County

Dining Centers Home Delivered Meals

0198

Dining Centers

Application Coordinator
Office of Long Term Care
Department of Health Services
PO Box 942732
Sacramento, CA 94234-7320

Santa Cruz 🛩

Louden Nelson Community Center
301 Center Street
427-0901

February 21, 2000

To Whom it may concern:

S Live Oak S

Elena Baskin Live Oak Senior Center 1777 Capitola Road

475-7177

🕶 Capitola 🕶

Capitola Community Center 4400 Jade Street

476-1884

S Ben Lomond S ■

Wilder Hall 9527 Mill Street

336-5366

I'm writing this letter in support of Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

The need for a managed point of entry into the maze of available services has been very apparent for many years. I have been very encouraged to be part of the collaborative planning process that has taken place so far this year. The discussions that have been generated by the multidiscipline planning have been exciting; offering creative solutions to existing challenges. The completion grant will allow important questions to be further researched and the planning process completed.

The efforts of the Santa Cruz County community to create a more cost effective, user friendly system of quality integrated services will serve the needs of many generations to come. Please continue your support so that the planning process may be completed and our visions for a better system of health care can be realized.

Thank you for your consideration.

Se Watsonville

Watsonville Senior Center

114 East Fifth

724-2024

Respectfully yours,

Liså Berkowitz Program Director SACRAMENTO OFFICE STATE CAPITOL ROOM 3076 SACRAMENTO CA 95814-4906 1916:445-5843 FAX 1916:445-8081

DISTRICT OFFICE
701 OCEAN STREET ROOM 3 18-A
SANTA CRUZ CA 95060
(831) 425-0401
FAX (831) 425-5124

DISTRICT OFFICE 7 JOHN STREET SALINAS. CA 93901 (831) 753-6386 FAX (831, 7536385

California State Senate

SENATOR
BRUCE MCPHERSON
FIFTEENTH SENATORIAL DISTRICT



February 18, 2000

Applications Coordinator Office of Long Term Care Department of Health Services PO Box 942732 Sacramento, CA 94234-7320

To Whom It May Concern:

I am writing this letter to express my support of Santa Cruz County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

Many in the Santa Cruz community have contemplated the vision of long term care integration for several years. The grant that was received for the past year provided a mechanism that allowed planning for this vision, and I have been impressed by the collaboration among consumers, advocates and service providers thus far. However, community processes take time and the work is not yet complete. Answers are needed to several questions that require complex data analysis before implementation can proceed. A completion grant will allow these questions to be answered and the planning that has been started to be finished.

With the many strengths of the Santa Cruz community, I believe we have a unique opportunity to create a better system that offers good quality, broad choice and easy access for people in Santa Cruz County who need long term care. Your continued support would allow for the completion of this important process, and I would urge your favorable consideration of this application.

Thank you for your attention to my request.

Sincerely.

BRUCE MCPHERSON

State Senator, 15th Senate District

BM/mw

STANDING COMMITTEES OF THE SENATE

EDUCATION. VICE CHAIR
APPROPRIATIONS
ENVIRONMENTAL QUALITY
PUBLIC SAFETY
REVENUE &TAXATION



0200

February 18, 2000

Application Coordinator Office of Long Term Care Department of Health Services P.O. Box 942732 Sacramento, CA 94234-7320

To the Application Coordinator:

I am writing to express my strong support for Santa **Cruz** County Health Services Agency's application for a completion planning grant for the Long Term Care Integration Pilot Project.

I am very impressed by the collaboration in our county among consumers, advocates and service providers. However, community processes take time; our work is not yet complete. We need answers to several questions that require complex data analysis before we can proceed to implementation. A completion a-rant is needed to allow these questions to be addressed appropriately.

Because of the strengths and the extraordinary spirit of the Santa Cruz community, we have a unique opportunity to create a better system that offers quality, choice, and easy access for people in Santa Cruz County who need long term care. Please continue your support so that we may complete this important process.

Thank you for your consideration.

Sincerely,

Karen Delaney
Executive Director

PS/mn

Paul Sanford Associate Director

☐ SANTA CRUZ/ADMIN. CENTER

1010 Emeline Ave. Bldg. C Santa Cruz, CA 95060 (851) (27-5070 • FAX (851) (23-0207 ☐ WATSONVILLE CENTER

251 E. Lake Ave. Ste. 8 Watsonville, CA 95076 (831) 722-0708 • FAX (831) 722-1013 J VALLEY CENTER

o116 Highway 9, Ste. 6-B. Felton, CA 95018 (831) 335-6844 • FAX (831) 335-6847



SENIOR NETWORK SERVICES

1777-A Capitola Road Santa Cruz, CA 95062 (831) 462-1433

0201

February 18, 2000

To Whom It May Concern:

We are writing to express our support for the Santa Cruz Health Services Agency's application for a completion planning grant for the Long Term care Integration Pilot Project.

Health and human services in Santa Cruz County are excellent. However, with so many agencies, there exists **confusion** and service gaps in some areas of the system The current planning grant has enabled our community to envision a user-friendly, comprehensive system which will deliver vital services to the elderly and persons with disabilities in our county in the most efficient manner possible.

The grant we received for the past year provided a mechanism that allowed us to **plan** for this vision. However, a process that is inclusive and thorough takes time. We need to continue our analysis before we can proceed to implementation. A **completion** planning grant will allow us to finalize the plan that we have all worked hard to create.

Santa Cruz County has the basis to become a model among California counties for quality, **cost**-effective long term care delivery. Please continue your support so that **we** may complete this important process.

Thank you for considering our request.

Sincerely,

Brenda Moss, Executive Director Senior Network Services

Brenda Moss

Bonnie McDonald, Site Manager Senior Network Services, Linkages Program

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