Attendees

- John Decker Zach Horch I Marcus Huff I Karen Mulvany C Lavonne Huff I Daphne Chakurian I Sonya Bingaman T Robert Levy I
 - Tania Desha Patti Uplinger David Lopez Calvin Hackett Mechelle Johnson Betsy Katz Tracy Brown Katherine Weston

Jennifer Bloom Herman Kothe Johnny Xiong Steven Sanchez Sergio Kimberly Yeargain Jacquie Foss

Empowering Self Determination through advanced care planning

- David Lopez Talks about "In the Light" ACRC & Valley Mountain Regional Center collation of compassion and care another non-profit. The coalition has another grant to utilize tools and trainings alongside ACRC. Creating a curriculum to really have the end of life discussions, SC's will be trained to talk to families and clients and to have the conversations in home.
- Karen Glad that this is a topic we are bringing up to talk about.

Discussion of Draft Learning Objectives

- Herman Kothe is the facilitator for Group 1
- Jennifer Bloom is the facilitator for Group 2
- Johnny Xiong is the facilitator for Group 3
- Tracy Brown is the facilitator for Group 4

Feedback

- Luanne Clayton email SPIN Selling *Situation, Problems, Implications, and Needs-Payoff* will be assigned to Tracy's Group. Training = 2 hours/4 hours long. What tools we are leaving with folks afterwards. If SC I would want all these tools to have these types of conversations.
- Joan Crawford email Feedback start the conversations earlier, why wait until it's too late? What are the safety nets that are used for end of life topics for sensitive topics and clients?
- Karen Mulvany They do not want to wait; single parent households need to be prioritized. There has to be a process to make an exception, one of the obvious exceptions is when the caregiver becomes ill at any age. Start at the 70-year-old age group. You don't want to start off with everyone when you're trying something new, but having an exception for seriously ill care givers and single parent households.
- Sara have a focus group but also have resources available. Useful to have an alternative/crisis plan for all individuals, it may be a big ask. An IPP what are some of the options that have been explored for an individual in a family.
- Betsy agrees with Karen, SC's need to know there is a process, if a situation may be valuable or if family members ask about it. Parents of a child at any age will think about this, they may not bring it up, but it's very reassuring that there is a process and there will be support when they ask for it or when they need it. It's helpful to prepare for something that may not happen for many years.
- John SC's were informed to ask in the meetings starting Oct 1. To client's caregivers 70+ to discuss their EoL plans or successions.
- Tania Desha got to experience talking to a client and their family about a plan and was happy to hear that in a previous IPP this had already been discussed. The mother discussed details about the plan and was happy to hear that Tania was interested.

- Daphne liked the focus group idea wonder if there's data on ages of caregivers that died or became incapacitated or age of clients that needed an emergency placement. John chimes in-Statistics tend to lean towards older parents, "in the next 10 years" how big of a housing need are we going to have for caregivers that are 70+. Housing for people with developmental disabilities we are a large and urban/rural area, we are looking at housing and setting aside money for affordable housing. Efforts are being made to currently lock down more affordable housing.
- Sonya this is a lot for SC's; I think we can provide other options than relying on the SC's pre recorded videos, scenarios set up, little samplings so that families can see what that actually looks like. SC's plates are already. Inform and educate the community offer other resources. Talking about this topic is a multi year process.
- Betsy one of the critical individuals that are involved in this are siblings. We had a parent group meet on this topic, and we worked as a group to discuss the process for future planning as we imagined it would beneficial to them. They had 80+ year old's show up that have not done anything to plan or think about this topic. They imagined an immediate family member would step up without having the discussion.
- Daphne this is all about communication. Have more resources available, to illustrate how things would be discussed, coaching, etc. Use "Youtube" to post videos for not only SC's but also clients so that they can watch the videos and refer to them when they need to. Caregivers want visual aids. Destigmatize death, the videos can help show that death a natural flow of life.

David & Mary Nisson email –

- SC's have been having these discussions, in a not so organized way for years. We're trying to create a difference in these discussions and documentation have a mystery given to you to see if people have engaged in conversation with the families. This will be in part of the training
- Translate videos or correspondence.
- Post messages to other stakeholders/friends/ social media?

Sibling Discussion – would fit well with Jennifer Bloom

Framing the training we can solve many problems that we're running into.

Tiger XD/Myra H. Email –

A lot of these topics are talked about. As it relates to inclusion, it has a place in conversation. John will take a look at these areas and he will get back with us if it correlates with anything to be modified he will let us know.

Sub Topics

Recognize the benefit of reflecting on their own beliefs about dying and end of life care and the impact that may have on their ability to help others with future life planning. Dialogue with clients and families in a culturally competent way, regarding caregiver succession planning using appropriate language.

- Cultural Competency
- Stages of Grief
- Emotional sensitivity of the Approach

Articulate the benefit to clients and families of early planning for caregiver succession.

- This is important to discuss as early as possible
- Discuss siblings
- Attack the Stigma of discussions
- Special considerations for younger parents
- Peace of mind

Describe a range of living options including independent living, supported living, family home agencies, and residential care, to clients and their families. Create a person-centered IPP narrative that captures the wishes of the client and planning team in relation to future living options.

- The idea of some sort of recorded vignettes
- Video different living environments / create something ourselves or use other resources
- Any housing the families themselves are able to provide.
- SSI don't qualify for affordable housing incomes are too low. Waitlist?
- Resource Discussion Table Sara Spencer's idea.
- Housing Grid

Share future planning tools that can assist clients and families related to accessing affordable housing power of attorney special needs trust, CalABLE, conservatorship, and end-of-life care decisions.

- POA
- Special Needs Trust
- Supported Decision Making
- CalABLE
- Conservatorship
- End-of-Life care decisions
- Affordable Housing

Comments amidst discussion -

- Discuss emotional competency as well because of fear of the topic. We don't want to force this topic on families, but what doesn't appeal to you, as that is just as important as finding that element does work.
- Jacquie Foss Person centered plans vs person centered culture.
- Sergio action items for sub groups what am I assigned to do? What if we focused on getting work done and after revision, it won't be perfect 1st time around, keep that in mind as we go through this process.

Where do we go from here?

• Have the subgroup meetings, SC's will audit the training materials. If the SC's are missing the points then we may need to refocus. Mechelle and John will pop into meetings. The expectation

Robert Levy 11:55 AM opitions @3 and #4. iPhone 11:55 AM This is Steven I'm interested in number 3. LaVonne Huff 11:55 AM Marcus Huff #3, 2, 1 Patti Uplinger 11:55 AM Patti Uplinger #1 future planning tools: #2 range of living options #3 early planning #4 own beliefs Sara Spencer 11:56 AM Sara Spencer - Order of Interest 3, 1, 4, 2 Karen Mulvany 11:54 AM Karen Mulvany - subgroup #3 Living Options Daphne Chakurian 11:55 AM DC Daphne prefers: subgroup 1, or 2 or 3 or 4 LaVonne Huff 11:55 AM LaVonne# 3, 2, 1 Kimberly Yeargain 11:55 AM 4, 3, 2 -- Kimberly Yeargain Sonya Bingaman 11:55 AM Sonya Bingaman - subgroup 3, or 4, or 2

is a monthly meeting + 2 subgroup meetings monthly