

**MEMORANDUM**  
**PLACER COUNTY HEALTH AND HUMAN SERVICES**  
**In-Home Supportive Services Public Authority**

**TO:** In-Home Supportive Services Public Authority Board

**FROM:** Maureen Bauman, Director of the In-Home Supportive Services Public Authority

**DATE:** July 12, 2011

**SUBJECT:** Membership Appointments to the In-Home Supportive Services Advisory Committee

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**ACTION REQUESTED:**

Appoint new members to the In-Home Supportive Services (IHSS) Advisory Committee, including Mary DeGraaf to Seat #6 representing IHSS service providers and Dolores Moore to Seat #1 representing IHSS service recipients, as respectfully requested by the IHSS Advisory Committee and IHSS Public Authority staff.

**BACKGROUND:**

IHSS is currently serving 1,860 Placer County residents that are elderly or disabled. IHSS makes it possible for these residents to remain in their communities; living safely in their homes, rather than requiring more expensive residential care. A recent survey of IHSS recipients showed that 91% of survey respondents indicated that the presence of an IHSS caregiver prevented a hospital stay within the previous 120 days. The IHSS Advisory Committee provides on-going advice related to the IHSS program.

The IHSS Advisory Committee is a State-mandated committee with a requirement that a majority of its members be current or past recipients of in-home supportive services. The purpose of the IHSS Advisory Committee is to submit recommendations to the Board of Supervisors on preferred services utilized for in-home supportive services, advise and make recommendations in regard to policy and funding, provide ongoing advice regarding services to the Board of Supervisors (the Board of the Public Authority) and any administrative body that is related to the delivery and administration of services, including the governing body and administrative agency of the Public Authority, non-profit consortium, contractors, and public employees.

Dolores Moore is a current IHSS recipient. Ms. Moore meets the requirements for filling a seat representing IHSS service recipients and she has been attending and participating in IHSS Advisory Committee meetings.

Mary DeGraaf is a current IHSS provider. Ms. DeGraaf meets the requirements for filling a seat representing IHSS service providers and she has been attending and participating in IHSS Advisory Committee meetings.

**FISCAL IMPACT:**

The State of California, Department of Social Services, funds all activities of the IHSS Advisory Committee. This action has no fiscal impact to the County General Fund.

**Attachments:**

Application for Membership - Dolores Moore  
Application for Membership - Mary DeGraaf



PLACER COUNTY  
BOARD OF SUPERVISORS

APPLICATION FOR MEMBERSHIP ON  
ADVISORY BOARD OR COMMISSION

THE FOLLOWING IS PUBLIC INFORMATION

APPLICATION FOR MEMBERSHIP ON: IHSS Advisory Committee  
(NAME OF BOARD, COMMISSION, OR COMMITTEE)

IF THIS BOARD/COMMISSION/COMMITTEE CALLS FOR A SPECIFIC TYPE MEMBER, PLEASE INDICATE THE  
POSITION FOR WHICH YOU ARE APPLYING: Service Recipient position

NAME: Delores Maule

SUPERVISORIAL DISTRICT IN WHICH YOU RESIDE: District 3

TIMES YOU ARE AVAILABLE FOR MEETINGS: DAYS: any TIMES any time

EMPLOYMENT EXPERIENCE/PROFESSION (A RESUME MAY BE ATTACHED):  
Retired

ORGANIZATION/COMMUNITY EXPERIENCE:

EDUCATIONAL EXPERIENCE:

APPLICATIONS WILL BE RETAINED FOR TWO YEARS

APPLICATION MUST BE FILED WITH THE CLERK OF THE BOARD OF SUPERVISORS  
175 FULWEILER AVENUE, ROOM 101, AUBURN, CALIFORNIA 95603

DATE: 3-22-11 SIGNATURE Delores Maule



PLACER COUNTY  
BOARD OF SUPERVISORS

APPLICATION FOR MEMBERSHIP ON  
ADVISORY BOARD OR COMMISSION

THE FOLLOWING IS PUBLIC INFORMATION

APPLICATION FOR MEMBERSHIP ON: I HSS Advisory Committee  
(NAME OF BOARD, COMMISSION, OR COMMITTEE)

IF THIS BOARD/COMMISSION/COMMITTEE CALLS FOR A SPECIFIC TYPE MEMBER, PLEASE INDICATE THE  
POSITION FOR WHICH YOU ARE APPLYING: Provider position

NAME: Mary McLaughlin

SUPERVISORIAL DISTRICT IN WHICH YOU RESIDE: \_\_\_\_\_

TIMES YOU ARE AVAILABLE FOR MEETINGS: DAYS: 3rd Thursday TIMES: 1:30-3:00 PM

EMPLOYMENT EXPERIENCE/PROFESSION (A RESUME MAY BE ATTACHED): 57 months

ORGANIZATION/COMMUNITY EXPERIENCE: was a member for 5+ years

EDUCATIONAL EXPERIENCE: AA degree

APPLICATIONS WILL BE RETAINED FOR TWO YEARS

APPLICATION MUST BE FILED WITH THE CLERK OF THE BOARD OF SUPERVISORS  
175 FULWEILER AVENUE, ROOM 101, AUBURN, CALIFORNIA 95603

DATE: 3/17/11 SIGNATURE: Mary McLaughlin

